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EDITORIAL COMMENT

THE JOURNAL SUBSCRIPTION PRICE

When we have to take, (or give) bad medicine, we like to be done with it as quickly as possible, so without preamble we announce the disagreeable news that the subscription price of the JOURNAL must be raised to \$3 on January first.

This does not mean that the JOURNAL income is falling off, but it does mean that all expenses of printing, publishing and mailing have increased during the year more rapidly than the normal growth of the magazine can keep pace with. Our subscription list is much larger than it was a year ago, our advertising is most satisfactory, our pages have been held down to the most economic limit, our department editors have had their space and their salaries curtailed, our employees and our printer are coöperating with us so that we may honestly say that there is no waste or extravagance in the management of the JOURNAL,—but even with all these efforts to curtail our expenditures, we cannot maintain our position safely without the help of our readers, to the extent of fifty cents additional on each subscription.

In order to be as fair as possible to our JOURNAL family, we are making this announcement two months in advance and we shall give them the privilege of renewing their present subscriptions at the old rate, \$2.50, during the months of November and December. Also, it is hoped by the JOURNAL directors that it will be possible to continue the rate of \$2 for alumnae subscribers whose association subscribes in a body, including the subscription with the dues.

The change to be made on January 1st, therefore, will be as follows: Single subscriptions, \$3; Canadian and foreign, \$3.50; clubs of twenty or more subscribers, \$2.75 each; alumnae association subscriptions, \$2.

LAST HONORS FOR MISS DELANO

Those who loved and honored Miss Delano, and who did not?—will be glad to read in the Red Cross Department, in greater detail than

could be given last month, the account of the services at Arlington when her body was laid in its last resting place.

Among those present at the commitment services were the following: Major General M. W. Ireland, of the Army, and Mrs. Ireland, Admiral Braisted of the Navy; Dr. Talliaferro Clark, representing Surgeon General Hugh S. Cummings of the U. S. Public Health Service; Mrs. Lenah S. Higbee, Superintendent of the Navy Nurse Corps, and group of nurses; Lucy Minnigerode, Superintendent of Nurses, U. S. Public Health Service, and group of nurses; Julia C. Stimson, Superintendent of the Army Nurse Corps, and group of nurses; Ida F. Butler, Acting Director, Red Cross Nursing Service, and group of nurses; Mrs. Kate Hough, Superintendent of Nurses, Federal Board of Vocational Education, and group of nurses; the clerical personnel, Department of Nursing, National Headquarters, American Red Cross; Mrs. William K. Draper, of New York, Susan C. Francis of Philadelphia, and Edna L. Foley of Chicago, representing the National Committee, Red Cross Nursing Service; representatives from National Headquarters of the Red Cross, the Fourteenth Division, the Atlantic Division, the Potomac Division, the New York County Chapter, Nursing Headquarters in New York, and from many state, district, and alumnae associations, as well as the close personal friends of Miss Delano.

MEDICAL AND NURSING WORK IN CHINA

We are always interested in reports from China, because the China Nurses' Association wisely took advantage of lessons learned at home; they achieved some time ago, what we have not yet attained, an authorized system of instruction for the training of nurses and uniform examinations. *The Quarterly Journal for Chinese Nurses* is a new magazine published by the Association, the first number having appeared in January of this year. The contents is in both English and Chinese. The English-speaking reader begins at the first page and reads to the middle of the Quarterly. The Chinese reader begins at the last page and reads forward. Even the advertisements appear in the two languages. There are four articles, (one written by a Chinese nurse), illustrations, letters, and news items. It is a promising beginning for a Chinese nursing magazine whose development we shall watch with interest.

Another Chinese publication recently received is "An Enquiry into the Scientific Efficiency of Mission Hospitals in China," published by the China Medical Missionary Association. The statistics, tables and descriptions give an idea of the medical work now being undertaken, its success, and its discouragements. The report closes

with a plea for more nurses, for only 48 per cent have a foreign-trained nurse or nurses on their staff; some have trained Chinese nurses; one-third of the hospitals have no skilled nursing whatever. In such institutions, the patients are cared for by their friends. There is, at present, an average of one hospital to every 26,640 people.

A NIGHTINGALE CALENDAR

A Florence Nightingale Centennial Calendar is being prepared by the Committee on Education of the National League of Nursing Education, the proceeds to be devoted to a fund for the new National Nursing Headquarters. The calendar will have an attractive cover, in colors, and will contain a short characteristic quotation from Miss Nightingale's writings for every day in the year.

The cost will be about \$1.00 and the calendars may be secured in single copies or quantities from Miss Albaugh, National Nursing Headquarters, 156 Fifth Avenue, New York. It is hoped that nursing schools and nursing organizations will make a special effort to push the sale of the calendar, not only as a means of helping our newest coöperative nursing enterprise, but also because it will help to make us all more familiar with the many wise, witty and strikingly pertinent sayings of the founder and genius of modern nursing.

HOW TO SECURE NEW POSITIONS

A nurse who wishes a position or some definite kind of work may with safety advertise in the JOURNAL, answer the advertisements that she sees there, or may apply to the Bureau of Information, 156 Fifth Avenue, New York, as this bureau has been established by our national organizations for this purpose. She should not accept a position through strange registries about which she knows nothing, especially if such registries send her to some unknown part of the country. There are certain commercial registries, not conducted by nursing associations, which make fair promises, exact large commissions, and sometimes send nurses to impossible positions. It is always possible by consulting the Official Directory which is published quarterly in the JOURNAL, to find out the names and addresses of state officers and, through them, to inquire as to the standing of any registry which is making attractive offers.

PUBLICATION COMMITTEE

Many of the state and district associations have included in their new by-laws plans for a publication committee, one member of which shall be responsible for sending news to the JOURNAL and for increasing JOURNAL subscriptions. We should like to have these persons

send us their names and addresses, so that we may work with them effectively.

THE MEMORIAL FUND

Every mail brings in its share of contributions for the Memorial Fund which is being raised by the nurses of this country for the Nightingale School of Bordeaux, France, in honor of those of our number who gave their lives for their country in the World War. At the time of this writing, the Fund amounts to \$47,000. We have only a little more than \$2,000 to raise before the goal will have been reached. Miss Minnie Goodnow, who visited the School during her sojourn in France, writes of it:

Tell your readers they can find no hospital more efficiently and economically administered than Dr. Hamilton's. With perfectly inadequate buildings, they are doing much fine work. There is no opportunity for expansion where they are, whereas the new site is nearly perfection in every way.

Dr. Hamilton's nurses are of the finest type. Any hospital in this country would think itself more than fortunate to have such an unusual body of women as students. They are educated, refined, earnest young women, and the training they receive is of the highest quality.

VALERIA HOME CAMP

Two nurses have written us of the Valeria Home Camp, near Peekskill, N. Y., founded as a recreation and convalescent home for people of moderate means, in order to carry out the wishes of the late Jacob Langeloth, who made provision for it in his will. The buildings in use at present are temporary ones, but it is the purpose of the trustees to erect others and to keep them open the year round. The house mother for the past summer has been a nurse; the guests have been teachers and nurses; the atmosphere has been homelike and delightful. Mr. Langeloth felt that ampler provision is made for recuperation for the poor than for those who could pay their way if the charges were not too high. Inquiries should be addressed to Valeria Home Camp, R. F. D. No. 1, Peekskill, N. Y.

MENTAL NURSING

Miss V. May McDonald, Organizer of Social Work for the National Committee for Mental Hygiene, writes us of unusual opportunities for nurses with mental training which will be offered at the newly organized Marion National Sanatorium at Marion, Indiana, for ex-service men with mental diseases. This institution is expected to become an important center for training in the various forms of service for the mentally sick.

NURSES' HOMES: DESIRABLE AND UNDESIRABLE FEATURES

FIRST PAPER

BY ADDA ELDREDGE, R.N.

Rochester, N. Y.

One of the problems of to-day which those who are endeavoring to conduct schools for nurses are facing, is the providing of a proper home for the pupil nurses. In the old days, long before the so-called "shortage of probationers," when it was still considered a privilege for a young woman to be accepted in a hospital training school, the home or place in which she was housed, was often some undesirable part of the hospital, sometimes under the eaves, even—let us whisper it—in the basement. To-day, although the writer has, during the past three years, seen such quarters, they are the exception, and we are more and more finding homes erected especially for the purpose for which they are used. Dormitories, i. e., wards, for pupil nurses though still found, particularly in connection with some of the Sisters' hospitals, are admittedly relics and are used only as makeshifts, awaiting reduction in the cost of building to be replaced by modern homes. In some of these, privacy is aimed at by an arrangement of curtains around the beds. Sleeping porches, in many instances, while not giving privacy, have brought plenty of fresh air with a minimum of discomfort to the nurse, when the room used for dressing, etc., is not overcrowded, as was seen, for instance, in one place where three rooms provided dressing space for the fourteen or more students, each of whom had a bed on the porch.

I have seen the superintendent whose room was bed room, sitting room, and office combined, with screens hiding those things too intimate for the latter use. Of course many superintendents have delightful suites, of bed room, sitting room, and bath. One or two schools have provided for the officers of the school, assistants, etc., bed room and bath and, occasionally, there are two head nurses who share the last and even a sitting room, but this is rare, the officers too often having no sitting or reception room except that provided for the pupils.

It is a curious thing to find that even in some of the newer types of home, with everything in the way of comfort, and much that is beautiful, the class rooms, laboratories, etc., are deliberately placed in the basement, showing that a home, not a school, is still the idea of the trustees and, I might even say, of the superintendent.

What should the ideal school home be? First, of course, single rooms, if possible, with running water. The rows of bowls in line, in most lavatories, we fear do not tend to encourage either bathing or that most precious possession,—modesty. The number of baths to be provided for students need not be given in figures,—but there should be enough. Who of us, trained in the old days, but remembers the standing in line waiting for your senior to finish, that you might get the bath, and at ten o'clock being forced to go to bed cross and bathless? Surely have enough baths for all.

An assembly room and class rooms, in size and number proportionate to the size of the school, should be planned and arranged with proper lighting for both day and night. Nurses are too often taught the care of the eyes in rooms where electric light must be used in the day time and possibly with direct lighting,—and "how to ventilate" in rooms which, if ventilated, are cold and draughty. Small wonder that such poor psychology has poor results. There should be laboratories, both pathological and dietetic, demonstration rooms, such as any school teaching scientific subjects must have. Reception rooms, living rooms, etc., must also be in proportion to the size of the school.

All these for the students, and we are sure in such a building the superintendent of nurses will be well cared for; but what of the equally important, ever changing band of faithful assistants, instructors, head nurses, surgical and night supervisors,—what comforts have we provided for them? Where will they receive their callers, where gather for recreation, etc.? In most schools we have forgotten them; they are neither "fish, flesh, fowl, nor good red herring." It really isn't dignified for her to receive her callers, perhaps men, in the same room with the students, so she must have none. She may, herself, be only a few months out of the school, hungry after her three years of close confinement to the hospital and school, for the same amusements and entertainments that girls in other fields have, and she must go on giving up these natural and innocent things, for lo! she must be a living example,—and then we wonder why the recent graduates, yes, even the older ones, are unwilling, the best of them, sometimes, to stay in hospital work, and why when they do, they are often such poor examples. So let us plan reception rooms and living rooms for the graduates who officer the school, with freedom to use them and have a normal life when off duty.

We have failed to mention libraries, yet we already have some very good ones. The Rhode Island Hospital has a good fiction library, a reference library, each in its own room, and a magazine room, all kept up to date by Dr. Peters as a memorial to his wife. Another excellent library, as we remember it, reference books and magazines,

is at the Cincinnati General. It is well managed and used. There are others, but these two seem especially to stand out in the memory. A library should mean a place for quest and study, well lighted and comfortable, with chairs and tables for both reading and writing.

Tennis courts, swimming pools, and gymnasiums are to be found in some homes; at the other extreme, as was seen by the writer, was a little living room furnished with donated lamps from the electrician who supplied the hospital bulbs, its table from the undertaker's, its rug and curtains from the department store, and its picture from the superintendent of nurses. This room was criticised by the president of the training school board as "cultivating a taste for luxuries."

A pleasant dining room is needed, for oh! the dreary dining rooms there are in the United States, where nurses eat their three meals daily, for three consecutive years, many of them in the basement and reached by such devious and unpleasant ways. How high up are many of the windows, with no view and little air. Cellars? Yes, some are, and how few dining rooms in our many schools have any taste shown in either the room or the table furnishings. Yet did it ever occur to the hospital board how little there is in hospital nursing to tempt the appetite, and how much to destroy it? Should not this room where the nurses eat be the brightest, cleanest, most attractive dining room which can be planned? And should it not attract, even draw, the nurse to it? So much of her health depends on her food, and appetite is so much the result of sight and of smell, too! So have that dining room bright, well ventilated, yet warm.

A place where the pupil can cook, make fudge, get a lunch, etc.; a laundry that she can use, once a luxury, now almost a necessity, are to be found in almost every nurses' home worthy the name.

Then the furnishing of this home, residence, or school, should everywhere be in good taste, simple, plain, so it will stand the wear, yet pretty and restful. Here memory brings a picture of the exquisite taste in the furnishing of the new home for its nurses at the Decatur Hospital, Decatur, Ill. The rooms are alike in quality and general character, but different in design and coloring,—the whole, a joy for every one who enters, as well as for the student nurse who finds it a delightfully restful home after the day of ministering to the sick. This home is presided over by a college woman who has previously been in charge of one of the halls of a woman's college.

This paper is intended to outline neither the best nor the worst which the various nursing schools in the different parts of the country have to offer in the way of homes for nurses, but to offer a few suggestions to which, we hope, others may be added, for anything which attracts young women from the best homes into the profession of

nursing and which makes their training as nurses part of a system which will make them educated and cultured women, normally developed on the practical, the intellectual, and the social side, examples as well as teachers of health,—cannot fail to be important to every one, to nurses as well as to hospital boards.

A second paper on this subject, written by Amy M. Hilliard, will appear in the December JOURNAL.

LINDA RICHARDS AS I KNEW HER

BY AGNES B. JOYNES

St. John, N. B.

In writing this paper, I have quoted from a hospital diary those passages relating to Miss Richards. They do not do her justice, of course, but written spontaneously as they were, and day by day during my training under her, they may give a better idea of her personality and teaching than anything I could write at the present time. They begin during a visit in Worcester, Mass., in the year 1904, where Miss Richards was then establishing a training school in a State Hospital. It was during the last years of her active hospital life. She was working then, as she had been for many years, to advance the standards of her school, educationally and in every other way; she was also striving as she had been from the beginning, for better facilities for training in the schools. Her work was then, as it had been often, rather single handed, I am afraid. What her patient, uphill labor accomplished may be seen in the best training schools of the country to-day. Greater things, due to her influence, will be seen as the years go by.

A few facts regarding Miss Richards' early professional life, which were current among the girls of our school, and which I have recorded, are given in more detail in her book of reminiscences which every nurse in the world should read—and then everybody else.

May 1, 1904. I have almost decided to take the nurse's training, which I have always meant to take some time. One school for nurses here is conducted by no less a personage than Miss Linda Richards, that wonderful American woman and nurse. To train to be a nurse under her supervision—what an experience it would be! But the school happens to be in a hospital for the insane. I should be scared to death to work there. However, a friend of mine has gone there to train. I met the enthusiastic young woman to-day, and she told me all about it. Miss Richards, it seems, was the first woman in America to receive a nurse's diploma. She trained under all the hardships that

a nurse of that time was called upon to endure, and she did it uncomplainingly, her friends say. At the same time, she saw with her keen mind and sympathetic soul, that many improvements might be made in the interest of the future patient and nurse.

She crossed the Atlantic for new ideas in her work. I wish I could remember all I was told of her, but at any rate, she was received very kindly in England by Florence Nightingale, then an invalid, but still with all the interest in nursing that had made her famous years before. The fine opinion which Miss Nightingale formed of the young American woman, upon sight, proved to have been well founded. Miss Richards in her hospital life in England and Scotland came up to all expectations, and more.

She has spent her life since in establishing training schools for nurses, bringing each as nearly as possible to the measure of her own fine ideals before going on to the next. What a beautiful woman she must be! I wish she were in some other kind of place. I think I shall go and talk with her about entering the school, just to see her and to hear her voice.

May 10th. I begin hospital work to-morrow. I went to the state hospital to-day to talk with Miss Richards. She looked me over with kind, keen eyes, and told me she thought she could make room for me at once if I cared to come. She strongly advised me to take the course. I feel a little scarey about it. I meant to ask her if the patients there ever kill people, and I forgot. Miss Richards makes one forget everything but her own wonderful presence. But I am bound to have my training with her, so there! I am more or less sensible at times (an original idea of mine, none of my friends having ever suggested it) and I feel quite sure that this is one of the times.

May 11th. On duty this morning, after Miss Richards had read to me all the rules of the institution, and had given me some kind advice on her own account. She looked at me long and meaningly when she read that we must never curl our hair. Anyone worthy of the profession, she said, will never wish to be anything but her own simple, neat self. I didn't curl my hair. The feeling against hair of that sort seems so strong here, however, that I expect she will send me to a barber any day she happens to decide that the morale of her school depends upon it. I am always finding myself handicapped one way or another.

June 15th. Miss Richards went through our ward just before I came off duty. She looked her sweetest and motherliest. She has a kind word for every one, and the patients all love her. She is a strict disciplinarian, a little fear is mingled with the nurses' love, but love she receives, and respect from everyone. She walks with a little limp,

a souvenir, I suppose, of the drudgery done for humanity's sake, that always makes me want to pick her up and carry her through the long corridors, which thought would amuse her mightily, I imagine, if she could guess it, she being about a foot taller than I, and heavier in proportion.

She looked me over to-day from my feet to my head. She looked hard at my head. Her hand lifted mechanically and smoothed her own glossy hair. She sighed and passed on. "Breakers ahead," as seamen say.

June 20th. The not wholly unexpected has happened. To-day Miss Richards advised me, in the kindest, sweetest way possible to smooth my hair down a little. I may get it pulled some day by the patients, she says, and the tighter I keep it, the less chance will there be to get a hold. If a patient ever pulls my hair, I will never live to tell the tale.

In class, again, to-day. Miss Richards is probation teacher along with her many other duties. We look eagerly forward to the time when we may sit in the cool class-room and be taught by her. She has had such wonderful experiences and she cannot help occasional reminiscences, and we are so glad she cannot. She has a funny little habit of rolling two or three pins about on the table in front of her as she talks. When the pins begin to roll, we draw a long breath and begin to listen. Many a delightful anecdote works its way in among our lessons, none the less interesting because it has a point.

To-day she taught us to make surgical dressings—sponges and pads. While we were folding sponges she told us pretty little stories of her hospital work in Japan. It seems that the first training school for nurses in that country was established by Miss Richards, and with such good effect that she had the happiness of seeing others started there before she left, to which her own Japanese nurses were called to take charge. But Miss Richards did not tell us all that. She speaks only of her work generally. She is so modest.

I was sorry when class was dismissed and we had to return to the ward. I shall be so glad when I am placed in a ward where the patients are really sick. I shall then begin to feel that I am going to be a real nurse some day. Miss Richards tells me that I make a great mistake in thinking this, that I am now in a position to get some of the most valuable experience that a nurse may have, that I not only have the opportunity here to observe the differences in different types of tortured nerves, but that I have an unusual opportunity to learn to sooth those nerves,—to minister to the spirit as well as to the body, upon which subject she thinks too much stress cannot be laid. She says unless I can do this I will never be a successful nurse. She seems to

believe that though the nurse cannot cure without the physician, she can at any rate kill, in spite of all the physicians in the country. It is not impossible, according to her, that death sometimes occurs, due not directly to disease, but to the effect of poisons (I cannot use technical terms) secreted within the body, not to the shock of the serious surgical operation, but to associated discomfort and fears, which the nurse, had she known how, might have allayed.

Fortunately, the patient often has a nurse who by a comforting touch of the hand can temporarily relieve pain; and who, by a fine tact can allay the fears. Under her care the wearisome, life-spending restlessness and agony will be broken by little naps of sleep, so little perhaps that the patient could not be convinced that he has been asleep at all. This nurse will not try to convince him. She will simply repeat her treatment, and repeat it, and repeat—through the day, through the night, until the naps grow longer and that nameless, terrible thing which is worse than pain and which kills when pain could not, takes its leave.

And so she seems to believe that the mission of the insane hospital training school is not to the insane alone. It has a wider scope. If we can learn to sooth nerves tortured as these are tortured here, we can hope to do much better work outside. If we can develop tact enough to allay the ever present and terrible fears of these patients, we can surely restore courage to people only physically ill. If the aches and pains here can be comforted, we need not be afraid to attempt any future case.

At the same time, she hints that if we have soul enough to make us willing to do all we can for the comfort of these poor people for their sake alone, we will have no time to worry about our future work, and will probably come out just as well in the end.

June 22nd. I believe I am becoming attached to this dreadful place. I at least begin to get individuality among the patients. Now the people about me are developing human faces, upon which the sweetest smiles mingle with those expressions of pain and misery common, I suppose, to the insane. There is an individuality in hair—black or brown or golden or snowy-white, shining, curling, straight, lustreless—all kinds of hair; in eyes, beautiful, many of them, but with such a pitiful, haunted look.

Individual character stands out clearly in this strange maze, with the most lovable, most appealing traits in it. As Miss Richards has said, the right word does go a long way with them. It is such a happy surprise to find that one occasionally has said the right word.

I can trot about the ward quite comfortably now. My blistered feet have been under the care of a chiropodist until they are real feet

once more. Miss Richards caught me limping and sent me off duty to have them attended to. She is very kind and particular about the nurses' comfort. She would send a nurse with blistered feet off duty as quickly as she would one with curled hair, or hard heels.

January 12th. If we only had less scrub-work to do here, and more time to give to the personal needs of our patients. A colossal "If" stares us in the face whichever way we turn. Miss Richards makes it clear to us that she understands the situation, and encourages us to do the best we can, while she tries at the same time to make us believe that the authority which creates and controls conditions here is all righteous and competent and wise, and that we nurses must never, even in mind, criticize a superior. I hope that her nominal superiors are as true to her as she is to them.

January 15th. Miss Richards has a way of nosing out trouble, as she goes through the wards. If ten patients talk at once, she seems to get it all, and to know just which story belongs to which. She has the faculty of picking out from the fanciful stories of which our poor people are capable, the tiny grain of truth. If any faintest complaint of a nurse reaches her ears, I should hate to be that nurse if there were any truth in it whatever. If the complaint is not verified by the nurse in charge (it is not always, and that makes the matter more complicated), or if it happens to be a charge nurse herself, she is simply placed in a succession of other wards among different patients and nurses. If the complaints continue, she goes, and the nurses who tried to shield her either go with her, or are the next under observation. She is weeding the school out. No unsuitable nurse escapes her for any length of time.

With the supervision and teaching of such a woman, our school should be the finest in the country in time. I hope the "powers that be" will exert their influence to keep her here as long as they can; then see to it that her successor is as much like her as possible—an intelligent, just, kind, forceful woman, an organizer, an educator—and they will have no need to worry about the future of the institution.

June 1st (Last year of training). All things considered, I am pleased with the way my patients are getting along. I find that just as Miss Richards has taught us, their feelings and actions reflect our own as a mirror reflects the face, only enlarging considerably upon them. If we allow ourselves to become fretted and nervous, it is of no use to try to conceal it from those supersensitive people. They know it before we do, and they, themselves, become nervous and fretful, only much more so. Every motion of our bodies counts as we do our daily work, and excites or calms them as the case may be.

Miss Richards constantly reminds us that quietness is very

essential, and that, at the best, the usual hospital ward, or even the private room, is not quiet. Even the rubber-heeled footfall of the nurses about their routine work, in the corridor outside the room, is very trying to a suffering person, and the occasional unguarded voice of the night nurse can make the night torture to any one accustomed to the absolute quiet of sleeping hours at home. And so in order to maintain anything of the all necessary quietness, the nurse must have understanding and sympathy, and then she must use all the self control she may happen to possess.

She assures us, and we have found it true, that in proportion to the self-control which we can use, our movements quiet, our voices gentle, in that proportion will our patients be calm and happy.

Soon I shall be taking my general hospital course, and I look forward to that with great pleasure, but I am proud beyond measure to have had my first training under Miss Richards. Nowhere else in the world, I imagine, is there a woman like her in the work to-day.

We will always remember her as she sat before us in class, and as she walked along the corridors of our wards, her cheering presence, her smile, her bright, sharp glance taking in every little detail as she passed; her whole personality of strength and kindliness.

I never knew her to have a favorite. She has severely reprimanded us, one and all, for any delinquency on our part, but at the same time, she has trusted us for meaning well, for being genuine in our interest, as she is herself. She is genuine, along with her other wonderful qualities, and in her genuineness, I imagine, lies her great power.

SUGGESTIONS FOR THE INDUSTRIAL NURSE

BY CHRISTINE R. KEFAUVER, R.N.

*Supervisor, Industrial Hygiene, Department of Health
New York, N. Y.*

An industrial nurse should be employed in any large industrial plant where dangerous processes are used, where the industry is such as to predispose the worker to a serious disease—T. B., anthrax, lead poisoning, arsenical poisoning, hatters' shakes, etc. She is even more necessary where women and minors are employed.

The question is often asked by nurses entering upon industrial work whether to wear their uniforms when on duty. Not to wear it deprives them of one of their most valuable assets. A uniform for some reason inspires confidence. It sets the wearer apart as one whose mission is plain to all men; it renders her more easily identified in

time of trouble, and it adds a certain impersonal atmosphere that renders it easier for a worker in need of advice of a personal nature, whether it be physical or economic, to state his troubles.

There is, too, the great value of suggestion exercised by the nurse's uniform. The average young factory girl in her natural desire to enhance her attractions, purchases clothes with a single view to their appearance and not at all with regard to their suitability or durability. The daily sight of the nurse in her trim, immaculate uniform with all that it symbolizes of service and self sacrifice may present the first example of the beauty of simple, suitable clothing properly worn that the young girl may ever have seen, and emphasize in a striking manner the difference between tawdry finery and suitable business dress.

The nurse should render first aid when such is necessary, but this should be only a small and incidental part of her work. The really intelligent and up-to-date industrial nurse will bend all her energies to educating the employees of the establishment where she is employed so that accidents will be reduced to a minimum.

Since absenteeism is a serious matter, both to employer and employee, the intelligent industrial nurse will investigate conditions which may cause either an unusual number of absentees or a large labor turnover. She will bear in mind the possibility of the acquirement of one of the many industrial diseases, and try in so far as she can, to eliminate conditions which predispose to them. Fatigue is one of the great difficulties in industries. She should make a special study of the causative agents of this, and try to remove them or to educate the employees in overcoming them.

The home conditions of the workers should be a matter of concern to her and she should set apart certain days in the week or certain hours in each day in which to call at the home of such workers as she feels need supervision. To do this intelligently, she should keep a card index of the employees, with a short history of the individual and by acquainting herself with the various employees she will shortly be in a position to judge whether the home conditions are in need of adjustment or not.

She should make a tour of inspection through the factory, note condition of toilets and rest rooms, condition of workroom, light, ventilation, etc., every morning, take note of all absentees, note any who appear to be ill, or even below par physically, and take the opportunity at noon to seek out those individuals in an unobtrusive manner and find out, if possible, what is wrong.

She should make a practice of collecting the employees in the rest room on certain days in the week, or at some other convenient place,

and giving informal talks on health topics. She should make these talks about fifteen minutes in length and follow them by an open forum in which all questions of interest on the subject of health should be answered.

When the industrial nurse has become well known to the employees, her health talks should include instruction on sex hygiene. It must be remembered that our stupid system of "taboo" on all matters of sex has allowed the young of both sexes, but especially women, to reach maturity with no information on this vital subject other than that gained through undesirable sources.

Since the health not only of the individual, but of the future generation, depends upon a proper understanding of the normal function of sex in life, it is necessary to remedy, so far as we are able, the lack of previous instruction on this subject. The prevalence of painful menstruation, miscarriages, still births, infant mortality, and complications at the period of the menopause, to say nothing of the evidence of our divorce courts and domestic relations courts whose records clearly prove that the great majority of all unhappy marriages are based upon an improper understanding of the marriage relation, show the crying need of intelligent education on this subject.

Lest any fear may be felt that the introduction of such a subject should have an unfavorable reaction, the writer wishes to state that in the past fifteen months she has talked in nearly two hundred factories, settlement houses, trades unions, clubs and churches on this matter, and has met with the most enthusiastic interest, has had hundreds of problems of vital importance to the individuals concerned presented for advice or help, and in no single instance has she, or any of her group of lecturers, met with a disagreeable incident.

As a general thing, audiences should be divided when being lectured to on sex hygiene, and addressed by a member of their own sex. Intelligent educational work along these lines will do more than any one thing to mould a proper and progressive attitude of mind on all matters of sex, and will aid ultimately in the control of the scourge of venereal disease.

Above all, the industrial nurse should understand the business conducted in the particular factory where she is employed. Nothing so wins the consideration and confidence of workers as the intelligent understanding of their work by persons associated with them and attempting to instruct them. Conversely, they are apt to be prejudiced against such persons if they exhibit either ignorance or lack of interest in the occupation in which the workers are engaged.

The industrial nurse should, therefore, pick out the particular kind of manufacturing plant which most nearly agrees with her

particular training and personal inclinations. If she is especially interested in surgery she would do well to choose a plant where much machinery is used and the hazard is largely one of accidents requiring surgical first aid. In such a plant, her first duty should be to familiarize herself with the type of machine used, the hazard connected with it, the safeguards provided for it, and whether the workers use these safeguards. If not, she can bring the matter diplomatically to the attention of the foreman without mentioning any individual. She can ask his advice about the most practical method of minimizing the danger of accidents, and win his coöperation in bringing such suggestions to the attention of the workers and convincing them of the value to themselves of "safety first."

If on the other hand, she leans toward the treatment of medical cases, she would be of more value in a plant where the hazard was such as to predispose the workers to one of the many industrial diseases. In such a plant she can by careful observation and education of the workers, counteract the ill effects of the industry by pointing out the particular processes which are conducive to loss of health, instruct in home visits in the necessity of hygienic surroundings, especially clean wholesome food and well ventilated sleeping rooms.

She can above all instruct the workers in the value of periodical physical examinations, and should follow these up to see that such defects as are discovered are remedied. It should be her task to convince the workers of the false economy of child labor, of the necessity of the expectant mother's abstaining from work for two months before and after childbirth; of the part which the lack of breast feeding plays in the high death rate of infants.

In so many communities the "home" is merely the place where workers sleep when they are not in the factories, that it is becoming an increasingly important matter how such factories are conducted. It is in every sense of the word a social problem.

The places where thousands of men and women spend most of their working hours can be made an inspiration and an educational factor capable of influencing and enriching their entire lives, or it can be made a treadmill inhabited by industrial drudges. It all depends upon the way it is managed, and the intelligent industrial nurse can wield a tremendous influence for good if she cares to expend the necessary energy.

HOW TO MAKE A PATIENT COMFORTABLE

BY CHRISTINE HANSEN

*Student Nurse, Nebraska Methodist Episcopal Hospital
Omaha, Nebraska*

The modern nurse is educated to be an intelligent assistant to the doctor and to give him precise and valuable information. She acquaints herself with the disease she is nursing, and with the method which the doctor follows. The individual who waits upon the sick because she lacks intelligence to do anything else, is now obsolete. Yet, her success or her failure is largely dependent upon whether she is capable of making her patient comfortable.

What is the cause of discomfort? An ache, a pain or a state of mind. Therefore, comfort is mental as well as physical. As a consequence, the nurse's first duty is to become acquainted with her patient, her tastes and distastes. This she must not accomplish by putting her through a series of questions in which she is to state all her idiosyncrasies and habits, but rather, the nurse must be alert and find out for herself. Numerous methods which make for comfort, must be constantly kept in mind, as no cut and dried rule can be laid down for her to follow. A soft pillow is pleasing to one person, while it makes another irritable.

The method of procedure is important. In general, where it is possible, the patient should not be awakened too early in the morning. If she already is awake, the breakfast hour is immaterial—somewhere between seven and nine a. m. Nothing should be done before breakfast except a temporary straightening of the bed, the patient's hands and face sponged, and her teeth cleansed; an alkaline antiseptic will aid in keeping her mouth in good condition.

From one-half to one hour after breakfast, treatments,—as enemas, etc., may be given, followed by a bath; not a slipshod patch bath, but the kind in which the skin senses the presence of soap and water. Of course a tub bath is preferable whenever possible. To insure comfort, the hair must be well kept. If she has not been previously accustomed to it, it will be well that she learn to value the comfort of a daily manicure. The bed must be made carefully; an accordiar pleated draw-sheet would hardly be appreciated by the most artistically inclined patient.

Pillows will do wonders if properly adjusted; the limbs or any part of her person which needs support may be comfortably propped with pillows. A support against which to brace the feet will often be

appreciated. If she is convalescing and able to read, her elbows as well as her book should rest on pillows. Plenty of fresh air and sunshine is invaluable, although, of course, direct sun rays and draughts must be avoided. Unless liquids are restricted, a plentiful supply of cold water must always be within reach. After these things have been attended to, the room may be put to order. Unless she be of slovenly nature, a tidy room will go far toward making a patient feel that she is in restful surroundings.

A good nurse will have done all this systematically; she knows what step to take first, and how to avoid covering the same ground twice. If she flits back and forth around the foot of the bed a dozen times while she is making it, she is in great danger of making an impression that she is chasing invisible butterflies. Provided she is not too ill, the situation might appeal to the patient's sense of humor, but could scarcely be said to add to her comfort.

Throughout the day the nurse will remember that the patient's position will require frequent changing, that she will need a period of sleep and, provided she is a convalescent, a period of recreation, etc. That she will under any conditions and at all times need a cheerful, courageous smile and a well balanced sympathetic attitude, is a small matter which, if not natural, can be cultivated by the nurse, making the patient feel that her care has been placed in the hands of a competent person interested in her welfare. What thought could be more comforting?

In short, in order to make another comfortable, the nurse must have a liberal supply of good, common sense to draw upon, and fit it to the needs of each situation as it arises. Even with this tact, she will accomplish nothing unless she is purely unselfish in her motives and deeds; but properly directed, it will mean the realization of all that can be done in relieving mental and physical aches and pains.

HOW TO BE FAIR TO YOUR FEET

These are some of the most important shoe sins: (1) Arches, (2) curving inner edges, (3) pointed toes, (4) high heels, (5) tight fitting, (6) poor fitting.

And these are a few of the impairments they produce: (1) Bad posture, (2) weak abdominal muscles resulting from bad posture, (3) fatigue, (4) nervousness, (5) deformation of the foot, (6) impaired circulation.

The day will come when the narrow, high-heeled shoe will be unanimously derided and will look as out of place as would a crinoline and hooped skirt in the subway. The untrammelled toes of the baby and primitive man are the perfect models. If the modern shoe was even beautiful since it cannot be comfortable, our suffering might not seem so absurd. But just watch people crossing a street and mentally compare their staccatto hops and affected jerks with the rhythmic swing of the savage. Grace is his because he has flexible, broad and strong support for his weight. As you ride down town in the car take a shoe census and see how many well-shaped feet you see and how many well-fitting shoes?—From the Health Letter of the Life Extension Institute, New York City.

ORGANIZING PUBLIC HEALTH NURSING IN A RURAL COMMUNITY IN BRITISH COLUMBIA

BY CARRIE WEBSTER, R.N.

Wichita Falls, Texas

After two busy months in school and district work at Saanich Health Center, I journeyed on the afternoon train to S—— Lake to establish the public health nursing work there, as arranged by the Women's Institute of that vicinity. The country was beautiful, green hills and the late autumn foliage of brown, yellow and red. We came into the clouds at Malahat Pass and could see only indistinctly the Saanich Arm and the Island Highway which seemed a mere trail ascending far below us.

'Twas a perfect downpour as I descended from the train at C—— Hill with my heavy bag of books and literature and my umbrella, a most useful companion. Two ladies of my nursing board met me and one of them, a practical Scotch woman, immediately asked: "Nurse, what kind of baking powder do you prefer? I'm just going over to get it and will follow right up."

I was led by Miss B., a tall, graceful young English Woman, around the station to where a ragged little pony and cart stood facing toward home. It was only after turning him around and having him dodge back three times, that we finally succeeded in getting him started slowly in the direction of my future home.

Mrs. A. and the baking powder arrived about the same time at the cottage of the school teacher, where I was to have a room and do my own cooking. My corner of the pantry was nicely supplied with tea, coffee and vegetables. These were afterward supplemented by a pint of milk daily, a nice roast once a week, occasional jars of fruit, and frequently a loaf of home-made bread. The people here live frugally but well, and I could not but think how lavishly money is spent in many American homes with little or nothing to show for it.

In this community the lack of transportation is one of the greatest difficulties of the public health nurse. The services of the aforementioned pony were very kindly offered. Though he is quite adept at turning and backing, his forward movements are rather negligible, and being crowded for time, I decided to walk. A new acquaintance at the health meeting also offered me a horse. This woman, who lives "out in the bush," had intended to have the horse shot, but I am welcome to him. She also mentioned that he had been lost for four days, but probably had not gone far,—I declined this offer with thanks.

As to the different ways of awakening the community spirit in my district, I decided the most direct plan of action would be through the public schools. The Canadian children are wonderful. In both of the rural districts which comprised my field I found the children courteous, gentle and responsive. They love play and action as well as our own youngsters in the United States, but for some unaccountable reason they seem to take more responsibility, and rarely appear as pert and forward as do many American children.

My first work in the schools, after examination of the children, was to establish literary societies. I had two reasons for doing this. First, because there was so much opposition in the district and so many stories afloat as to what the nurse was going to do in the way of sanitation and personal hygiene. In this way I secured the coöperation and enthusiasm of the children without incurring any great amount of displeasure. My second reason was the apparent need of training along this line, as the children leave school so early in these rural districts, and appear at such a disadvantage when ignorant of the rules of order and the proper way to conduct a literary society or other meeting.

One school has decided on C. Hill School Club as the name of its society. Since we expect to stand for something worth while, we are having the letters C. H. S. C., on our pin and pennant, represent our manner and action in the following words—Courtesy, Honor, Service and Courage. The children of the S. Lake School have decided upon the name "Mutual Improvement Society" and the monitors of the Health Leagues in this school are beginning to give almost perfect reports in the observation of daily health chores. The Senior and Junior Health Leagues in these clubs are writing essays on "How to Keep Well," and the local paper will be asked by the chairman of my nursing board to publish the best essay from each school. The children are very enthusiastic about this contest.

This is a wonderful climate and a country rich in resources, yet many of the children both in school and of pre-school age are under nourished and physically defective. The two greatest defects in school children examined were obstruction of nasal breathing and carious teeth.

Many parents do not realize that it is poor economy to send a physically defective child to school and expect intellectual development.

The thing I regretted most in my work in this district was my inability to get some very bad throat cases attended to, partly because of the short period of two months for organization work, but chiefly due to the belief of many of the leading residents of this community

in the infallible advice and long continued treatment of the chiropractor. For instance, one child was being boarded in the city in order to have its spine massaged, the parents being promised that within a period of three years the throat would be cured. An operation seemed so horrible.

In talking over the matter with Dr. C., an eminent throat specialist in Victoria, he said that it was not altogether the fault of the people, that in the past years surgeons had not been conservative enough in their operative work and that the result was the swinging of the pendulum to the other extreme, and we fail to get work done that means so much for the future health of these children.

Dr. D., secretary of Provincial Board of Health, in his lectures throughout British Columbia, strongly advocates the establishment of health centers supported by taxation. In these centers it is planned that preventive medicine should be the chief subject of instruction and practice, and the advice of the best medical authority may be had for one and all. Dr. D. contends that if the money for support is raised by taxation, as for school purposes, the people will not hesitate when the visiting nurse recommends free treatment as they would in a charity hospital. The great object in his campaign is to remedy, for the future generation, the 80 per cent of the preventable defects as reported in the recent war statistics.

THREE CASES: THE MONEY TEST

BY AGNES JAMES, R.N., AND KATHARINE JAMES

Cincinnati, Ohio

(Continued from page 24 of the October JOURNAL)

I had been there almost a week before I discovered Lyda's love story. It was one evening when I'd run through "Oh, Promise Me," on the victrola for the steenth time for her, with the lights lowered, that I saw she was weeping silently. The prospect of something sentimental cheered me a good deal, so I put on Tosti's "Good-bye" and prepared for confidences.

The poor thing was tickled to pieces to talk about it, but instead of the confession of unrequited affection I had expected, I found that it was quite the contrary. She loved and was loved by a young man who was employed in a select drug store in the neighborhood. He was quite qualified to fill prescriptions, she said, but in the hot weather he helped with the soft drinks; and it was while sampling a Victory

sundae, that she first gazed into his eyes, and all the summer she had drunk long and deeply at his counter.

The friendship had grown and flourished under the very eyes of the unsuspecting Hutchinses. Of her brother-in-law she was not so afraid, but of what Daze would say and do, she was in mortal terror. Of course she had decided that ultimately there was nothing for them but the sweet sorrow of parting, but in the meantime she ached for a sight of him. Poor little soul; it was so simple that it was pathetic, and while I believe some women are happier with a hopeless love than any other sort, she was the type who was spoiling for a little two by four flat, and a man coming in for three meals a day.

My mind was working in spite of me, but I must admit that the arrangements which followed were prompted less by solicitude for Lyda, than by another emotion that Daze had kindled in my breast.

"I'm expecting a gentleman to call this evening," I said shyly to her, after dinner a few nights later. Mr. Hutchins, standing on the hall rug, smoking his cigar, took notice and looked at me, surprised but benign. His wife regarded me spitefully and called out to the butler, who was passing, that "the nurse's young man" was to be shown upstairs when he arrived. To my mortification I felt myself color furiously, which fact was not lost on anyone.

I tell you I felt a good deal of a martyr as I went upstairs. My patient was in such a flutter of nervousness and emotion that it was a terrific business getting her ready; and by the time Parkins had escorted my expected caller into my presence, I was so fussed I almost forgot to pretend that I knew him. He played back very well.

We sat down on an adorable couch in the little hall, and talked as naturally as we could, till I was sure that Parkins had evaporated. Then I opened the door of Lyda's room, and there she was with the couch pulled as close to the threshold as I could get it. I turned my back on the meeting, and sat outside in the hall in case of accidents. Everything passed off all right and we were all so elated, I actually went downstairs with "my Henry" at parting. To my dismay, Mr. Hutchins materialized from somewhere, and in the friendliest manner in the world approached. There was nothing for it but an introduction, and when I went back upstairs, they were still talking at the door. I didn't tell that to Lyda, for she'd never have slept a wink. As it was, she didn't stir all night, which was a good deal better than I did.

Next day, just what I dreaded happened. I knew by the way Dr. Slater looked at me, that Daze had waylaid him, and filled him up. He seemed sort of puzzled, but asked me in the nicest manner, when it was to be. I believe I'd have blurted out the truth, but two silly tears came into my eyes, so I had to pretend I was laughing and

covered with maidenly confusion, which perplexed him more than ever.

If anything could have consoled and rewarded me, it was Lyda's happiness and gratitude, and I knew that a second visit from Henry would be inevitable, not only for her sake, but to satisfy Mr. Hutchins' friendly interest in my attachment.

He expressed his opinion that my friend seemed to be a right smart fellow, and that, in appreciation of my kindness to Lyda, he'd be glad to put him in the way to better himself. Daze looked down her nose and said: "All things considered, it might be wiser not to lift him out of his station," a remark that decency forbade me replying to in her husband's presence, but it lent its influence to my resolve to help things along, and Henry was communicated with, without delay.

This time we were bolder, and in a fit of recklessness I left my post at the head of the stairs. My patient and her caller comfortably installed, I curled myself up on a sofa in the hall, where I was within sight and call without disturbing their privacy. Dr. Slater had not paid his customary call that day, but I simply imagined it was because he did not consider it necessary. The truth was, he'd been rushed to death and had put us off till after dinner. Daze met him in the hall and insisted on bringing him up—to embarrass me, of course—and there was I, calmly asleep on the couch, and my patient and my caller oblivious to everything but the society of each other!

I don't know what Dr. Slater looked like, but Daze's expression, as she confronted them, drew from Lyda one scream, which brought Mr. Hutchins three steps at a time, and needless to say, awakened me very effectively. It would take a literary genius to do justice to what followed. Daze naturally took the center of the stage and for want of words, accomplished a series of explosive shrieks. Lyda kept her nerve surprisingly, and I was quite proud of the quiet way Henry faced the whole thing. Mr. Hutchins was fully occupied in trying to calm his wife, and looked profoundly miserable. Of course, Dr. Slater turned to me for an explanation and I gave him the best I could under the circumstances. He seemed surprisingly relieved, and thanks to him Daze was finally rendered harmless and led away.

Once she had gone, the atmosphere cleared miraculously. Mr. Hutchins was fine to Henry, and told Lyda he was real glad for her, and that they'd just have to do their best about Daze till she came around. I left the three talking and slipped into the hall, where I waited for the doctor coming from Daze's room.

I felt terribly nervous, as of course the whole thing was my fault, but when he came I told him everything from the beginning, and that

none of us had intended the deception to go further than just a friendly call to help Lyda's loneliness and give them more courage for a final parting.

He smiled, "Well, it would certainly have been a pity to have made a tragedy of their lives on account of Mrs. Hutchins, so it has really turned out admirably, but in future I wouldn't let my sympathy lead me quite so far."

"It wasn't my 'sympathy,'" I flashed out, and I told him about the soup.

I thought he'd be ill with laughing. Then he stopped long enough to ask me if I considered the punishment adequate for the crime, because he didn't want to leave me on the case if I felt I had any more grudge to work off. I said I was willing to call it even, and that if he'd forgive me for the fuss I'd gotten him into, I'd be a model from now on. He's the best thing on earth, and we shook hands on it. The last thing he said to me was: "What you need is to develop a little thicker skin and a keener sense of humor."

Well, I tried to, but it was pretty hard to find anything funny in the days that followed, but finally Mrs. Hutchins came round, and by that time Henry had a new job in a big wholesale drug house, which she could make sound quite swell. Lyda and he were to be married as soon as she could walk properly. By the time I went home, preparations for the wedding were in full swing and in spite of the protests of the bride and groom-to-be, one could see that a terrific function was under way.

Of course I told Mary everything, and being Mary, she had to see even Daze from a charitable angle.

"She was only true to type, Cordelia," she said, "and you know riches are a terrible test of character."

"I wouldn't mind having the money test applied to mine," I answered.

"Seems to me," she said, laughing, "you've had it!" Which, all things considered, was the truth.

DEPARTMENT OF NURSING EDUCATION

IN CHARGE OF
ISABEL M. STEWART, R.N.

THE CLASSIFICATION OF NURSING SCHOOLS

Among a number of other pieces of work undertaken last year by the Committee on Education of the National League of Nursing Education was the working out of a suggestive basis for the grading or classifying of nursing schools. This is a matter which vitally concerns every training school and every nurse in the country and it is therefore desirable that there should be the fullest discussion of all the factors to be considered in determining the relative standing of any kind of nursing school.

The Education Committee would be glad if state and local leagues would make a special point of bringing this matter up for discussion as early as possible and send results in to Miss Gray, the chairman of the sub-committee, before the first of January. The following report by Miss Gray will make quite clear the purpose of the blank and the general method to be followed. A few changes have been made in the questionnaire as a result of discussion and questions sent in. A few of these reprints can be secured if requests are made at once.

REPORT OF CLASSIFICATION COMMITTEE

We have reached a stage in our growth where some standard by which to classify nursing schools is as necessary to us as the standards set by the dictionary are to the student of English. If at some time in the future it is possible to have a book for handy reference that will enable the busy superintendent to classify her own school according to the accepted standards of the League, and at the same time to measure its strong and weak points impartially and accurately, it will probably prove a most effective weapon in the hands of those who are working for better schools and better educated nurses, which in time mean better care for the sick.

The sub-committee which consented to undertake this task did so with much reluctance (for it fairly bristles with difficulties), and a very strong conviction that the only classification that would meet our needs, and prove of value, would be one which was worked out from the assembling of information that expresses the ideas and ideals of women who are actually struggling with the problems of nursing schools, and who represent the different types of schools we find in our midst.

We want information from the small school that provides adequate experience by means of many affiliations, as well as the large school that finds all classes of cases within the walls of one institution, and from the private hospital that is not run for profit, as well as from the municipal hospital supported by public taxes. It is hoped that each individual will draw upon her own experience, and not necessarily allow her answers to be influenced by her present connection. In other words, we want the fullest coöperation of everyone in order that our study shall be as practical as possible, and shall represent the ideals of the League members, and not any one group.

The first task undertaken by this committee was to assemble data regarding the score cards used in various forms of work. We were familiar with the use of such cards for grading schools, colleges and hospitals, but were unprepared to find how extensively they are used for grading industrial plants and their varied output, as well as agricultural products.

After some study of the problem presented, the committee decided that the annual meeting of the National League furnished an unique opportunity for discussion, and we felt that the most effective way to get the consensus of opinion of the members was by means of a questionnaire, which it has been most difficult to limit to a reasonable length. We have tried to confine our questions to vital points and have therefore passed over many details that are of interest and importance, but not essential in the preliminary survey.

The plan was that each member attending the meetings would take this questionnaire away with her and would spend some time and thought in answering the questions, and then return to the chairman of the committee, at 132 East 45th Street, New York City. The answers have been rather slow in coming in, and it is urged that an effort be made to complete them before January 1st, 1921, in order that the committee may continue its work.

The answers to many of the questions hinge upon the standard set for a Grade A school which will be rated at 100 per cent. This makes the first question somewhat of a key question.

COPY OF QUESTIONNAIRE

During the war, when the Committee on Nursing of the Council of National Defense was trying to assign pupils to nursing schools in all parts of the United States, it was found extremely difficult to get information about these schools that was accurate, fair and trustworthy. It is probable that such information exists, but if it does it is widely scattered and not readily available for use. Moreover, when such information is wanted it usually is wanted promptly. Accordingly, a sub-committee appointed by the Committee on Education of the National League is attempting the task of working out something approximating

a score card to be used by the training school inspectors in various states so that we may in time assemble the information that will place a school automatically in one of four groups—i. e., A, B, C, D.

In order to make this as democratic as possible, the plan is to work out the score cards for the different groups from answers obtained from about three hundred schools representing various types in different parts of the country. For instance, it is proposed to build the standard for a Grade A school from the answers to the following questions, plus any suggestions that may be offered and prove of practical value.

1. Should Grade A include the leading schools now in existence, or should it set a standard for us to work up to? It is probable that many schools now in existence have some of the essentials that it will be decided to require of Grade A schools, but is it likely that any one will have all of them?

2. Should Grade B include the highest schools we now have or a second grade?

3. Should Grade C include second grade schools or average schools?

4. Should Grade D include average schools, or a poor grade?

5. Will four groups be enough, or would you include a fifth?

6. If you include a fifth, how designate?

(The following questions refer to Grade A. School.)

1. Should Grade A school have definite support other than just dependence on the hospital?

2. When not independent of the hospital in any other way, should it have a separate budget?

3. What type of hospital building? Fireproof? Meeting modern sanitary requirements?

4. What type hospital, General municipal? General endowed? Special, such as mental and children? Private: Self supporting? Run for profit?

5. What should be the average number of patients? What should be the minimum capacity? Public wards? Private rooms?

6. What services should it include and approximate time for each? (Before answering this, see question 9.)

	Male	Female	Time
Medical	{	Acute	
		Sub-acute	
		Chronic	
Surgical	{	Acute	
		Sub-acute	
		Chronic	
Infants.			
Children	{	Acute	
		Sub-acute	
		Chronic	
Venereal.			
Skin.			
Ear, eye, nose and throat.			
Specialling patients.			
Mental and nervous	{	Acute	
		Sub-acute	
Communicable.			

Out patient.

Operating room—Time.

Obstetrical { How long before delivery?
How long after delivery?

Gynecological { Acute
Sub-acute

Night duty—How much each year? How long at a time?

Social service.

Public health.

Affiliations.

Service

What records would you require of the affiliated school? What records would you consider it essential to submit to the affiliated school?

7. What preparation would you consider essential for the following members of the faculty of such a school, and what salaries adequate?

Principal and Superintendent of Nurses	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Assistant Superintendents	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Assistant Principal	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Instructor, Elementary Science	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Instructor, Practical Nursing	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	

How many hours should each instructor be required to teach weekly?

How many different subjects can one instructor do justice to? Should she have any other duties beside teaching?

Supervisors	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	

Should other paid instructors be provided? Are doctors or outside lecturers paid? If so, how much? Should medical staff assist in teaching? If so, are they paid?

Head nurses	{	Preparation	{	Academic
		Experience		Professional
		Salary		Postgraduate
Do head nurses teach? If so, what subjects?				
Social director	{	Preparation	{	Academic
		Experience		Professional
		Salary		Postgraduate
Outline duties.				
Dietitian	{	Preparation	{	Academic
		Experience		Professional
		Salary		Postgraduate
Outline duties.				

How many hours of teaching first year? Second year? Third year?

8. How many and what type of instructors would you consider necessary for a school conducted in connection with a hospital of (a) 100 beds, (b) 200 beds, (c) 500 beds, (d) the number of beds you have decided as necessary for a Grade A school?

9. What length of training should be the minimum?

10. How long a preparatory course? (a) Daily hours in wards? (b) Daily hours in class?

11. Number of hours in hospital per day after preparatory course? Number of hours in classes? Time of day? Any classes at night? Number of hours in study? Number of hours in recreation? Time off duty in each week? Vacation each year? Allowance for sick time?

12. What curriculum should we consider as necessary? (a) Standard, (b) State, (c) Modified? Would you require introductory courses in public health? How long? Would you require introductory courses in institutional work? How long?

13. Would you require tuition fees? Would you furnish books? Uniforms?

14. Would you grant an allowance? How much?

15. What should be the educational requirement for entrance? What should be the age? What should be the health requirement? Would you require a physical examination after entrance? Would you require a physical examination during training? How often? When? Would you require any other credentials? From whom? What would you consider adequate provision for proper care of sick nurses?

16. What would you consider the minimum of class-rooms, laboratories and equipment for teaching? (a) Assembly rooms? (b) Lecture and demonstration rooms? (c) Laboratories—Science? Dietetics? Annual appropriation for equipment? (d) Library? Annual appropriation for books and magazines? (e) Reference reading or study rooms?

17. How many patients should one pupil be required to care for?

Medical	Acute
	Sub-acute
	Chronic

Surgical	{	Acute
		Sub-acute
		Chronic
Obstetrical	{	Before delivery
		After delivery
Gynecological	{	Acute
		Sub-acute
Infants.		
Services—		
Children	{	Acute
		Sub-acute
		Chronic
Venereal.		
Skin.		
Ear, eye, nose and throat.		
Mental and nervous.		
Communicable.		
Night duty.		
Specialling patients.		

18. What, from above, should be the general average of nurses to patients (Acute, Sub-acute, Chronic)?

19. What should be the proportion of graduate salaried head nurses to pupils?

20. What should be the proportion of supervisors to pupils?

21. What proportion of orderlies is required for assistance with care of male patients?

22. What proportion of orderlies is required for general utility service?

23. What proportion of maids for assisting with care of female patients?

24. What proportion of maids for cleaning, etc.?

25. What type of residence? Fireproof? Meeting modern sanitary requirements? Covered connection with hospital? (a) Number of sitting rooms? (b) Number of single bedrooms, number set basins, size? (c) Number of double bedrooms, number set basins, size? (d) Number of bathrooms (in proportion to those using them)? (e) Number of toilets (in proportion to those using them)? (f) Is there a laundry for nurses' use? (g) Is there a gymnasium? (h) Are special sleeping rooms provided for night nurses? (i) Is there a suitable place for recreation? (j) Is there a place for nurses to cook?

26. Meals served in hospital dining room or residence? (a) Round tables? (b) Number of pupils per table? (c) Service: cafeteria, maids, each one serves how many?

27. What type of government should be in force in a Grade A school? (a) Military, (b) Student, (c) Coöperative? (Please classify under one of three heads and explain briefly your conception of it.)

COMMITTEE OF THE ROCKEFELLER FOUNDATION FOR THE STUDY OF NURSING EDUCATION

In October, 1919, the Committee on Nursing Education organized for work with Professor C. E. A. Winslow as Chairman and Josephine Goldmark as Secretary. This committee appointed under the auspices of the Rockefeller Foundation, was originally asked to

study and report on education for public health nursing. Last spring its scope was extended to include a broader study of nursing education in general, including training for private duty nursing and institutional teaching and administrative positions. The committee now consists of eighteen persons, representing physicians, nurses and lay persons identified with public health work. They are: C. E. A. Winslow, M.D., New Haven, Chairman; Mary Beard, R.N., Boston; H. M. Biggs, M.D., New York; S. Lillian Clayton, R.N., Philadelphia; Lewis A. Conner, M.D., New York; David L. Edsall, M.D., Boston; Livingston Farrand, M.D., Washington, D. C.; Annie W. Goodrich, R.N., New York; L. Emmett Holt, M.D., New York; Julia C. Lathrop, Washington, D.C.; Mrs. John Lowman, Cleveland; M. Adelaide Nutting, R.N., New York; C. G. Parnall, M.D., Ann Arbor; Thomas W. Salmon, M.D., New York; Winford H. Smith, M.D., Baltimore; E. G. Stillman, M.D., New York; Lillian D. Wald, R.N., New York; W. H. Welch, M.D., Baltimore; Helen Wood, R.N., St. Louis; Josephine Goldmark, Secretary; Carolyn E. Gray, R.N., New York, and Anne H. Strong, R.N., Boston, Assistant Secretaries.

During the past year investigations have been carried on along two lines: first, to study public health nursing activities carried on by nurses and by persons other than nurses with a view to judging the calibre of the work, and the type of training best fitted to prepare for it; and second, to study the training afforded by hospital training schools and by graduate courses for public health nursing.

In both fields the investigation has necessarily been confined to representative intensive studies. Typical communities, rural, small-town, and city, have been reported on by field agents of the committee who have accompanied individual nurses on their rounds.

In the study of hospital training schools it has likewise been obviously desirable to choose representative institutions for intensive observation and study. The inquiry has been centered on all those factors in the school and in the hospital which are related to the training of student nurses. The method has been by detailed observation of the work in class and on the wards, by conference with individual students, instructors, and supervisors, and by a limited study of records.

In all its investigations, the committee has met a most generous response from the training schools, from public health organizations and from individuals, alike. It is hoped that a similar full response may be obtained to the inquiries which are to be directed to private duty nurses. The judgment of the committee as to the best types of nurses' education will in the end be based on an analysis of all these facts, gathered in the various fields of nursing.

DEPARTMENT OF RED CROSS NURSING

IN CHARGE OF

CLARA D. NOYES, R.N.

MISS DELANO, THE GREAT NURSE, LAID TO REST IN ARLINGTON

BY JULIA C. STIMSON, R.N.

Major, U. S. Army Nurse Corps

On Saturday, September 18, 1920, final tributes were paid to the memory and achievements of Jane A. Delano, Director of Red Cross Nursing Service, and formerly Superintendent of the Army Nurse Corps, who died overseas on April 15, 1919, while on an inspection trip. The interment was in the Army Nurse Plot of the Arlington Military Cemetery, with full military honors.

To those who have not seen this most beautiful cemetery in the world it is hard to describe the splendor of the scene. On the rolling slopes of the old Lee estate, high upon the banks of the Potomac, overlooking the shining Capitol of the country, under beautiful trees and close cut sod, lie ranks and ranks of the Nation's dead. A gleaming white marble colonnaded amphitheater stands out amid the green of the trees with wonderful impressiveness.

For three days previous to the interment ceremonies, the casket containing Miss Delano's body, covered by a flag, lay in state, surrounded by the flag-covered caskets of forty soldiers, in the chapel beneath the amphitheater. A guard, always in attendance, pointed out to the many visitors the casket of the "nurse who died overseas," which was distinguished from the others only by two crossed palm leaves that lay on the top. These palms had been placed there by the New York nurses who met the boat, when the body was taken from the U. S. Transport "Sherman" which brought it from France.

On the day of the commitment ceremony, hours before the time of the service, groups of nurses and other visitors began collecting about the Nurses' Plot. A special committee of Red Cross nurses arranged the quantities of wreaths and flowers that had been sent from all over the country.

Uniformed representatives of the nurse corps of the various branches of governmental services arranged themselves in groups, and near them stood a body of Red Cross nurses in their white uniforms and red-lined capes. The superintendent of each nursing service stood with her group. The closest personal friends of Miss Delano, and a group of her clerical assistants stood nearest the grave, at the foot of

which were representatives of the Government, the Surgeon General of the Army and Navy and the Public Health Service.

As the whole assembly gathered about the flag-covered casket, which previous to the services had been brought from the amphitheater, the sound of marching feet was heard, and a troop of soldiers from Ft. Myer, headed by the regimental band, approached and drew up at attention across the Plot. The armed guard who had been standing at the head of the grave, stepped to one side and the Army Chaplain, Milton O. Beebe from the Walter Reed Military Hospital, took his place. As the last notes of "Nearer My God To Thee" were played by the band, the chaplain began the services. At the conclusion of the prayers, into the stillness of the shining afternoon, the salute of the three volleys was fired by the rifle squad. The bugler then stepped to the head of the grave and sounded taps, that beautiful bugle call which chokes the throats of the many who have heard it so often under similar circumstances during the last few years, and the brief services were over. The band played a few bars from the Chopin Funeral March, and the troop, wheeling at the quiet command of their leader, marched off to another part of the cemetery, where commitment services of the soldiers whose bodies had also just been brought back from France, were then held.

TEN SCHOLARSHIPS IN PUBLIC HEALTH NURSING AWARDED BY LEAGUE

Ten scholarships in Public Health Nursing instituted at the Conference of the League of Red Cross Societies held in Geneva last March have been awarded, according to an announcement from Paris. These will go to Poland, Czecho-Slovakia, Roumania, Greece, Serbia, Belgium, Portugal, and three South American Republics. England, Switzerland, Sweden and Holland will provide scholarships for nurses from their own countries. At the request of the League the American Red Cross has granted one scholarship for France, one for Italy, and two for the United States.

In making the selection of American nurses, names of those with some public health training were submitted through divisional officers and from these lists it was decided to award the scholarships to Dorothy M. Ledyard, of San Francisco, Calif., and Charlotte Simon, of New York City.

Miss Ledyard is a graduate of Mills College, California, and of the Children's Hospital, San Francisco. She acted as assistant superintendent of nurses at the Children's Hospital following her graduation; also did public health nursing. During the war she served with a mobile operating unit in France. Miss Simon is a graduate of the

New York Presbyterian Hospital where she specialized in public health nursing. Since her graduation in September of last year she has been in public health nursing, stationed recently at Brunswick, Me.

The League's plan in establishing these scholarships is to give a course of training in public health nursing at Kings College for Women, University of London; whereby an eligible personnel representing many countries may be trained in order that they may return to their countries equipped to do pioneer work in public health nursing.

REGULATIONS FOR WEARING RED CROSS NURSING SERVICE BADGE

Each nurse receiving a badge should make every effort to protect it against misuse. In order to do this we call your attention to the following regulations governing its use:

FIRST: It is NOT to be worn when in street clothing nor when on duty in a civilian hospital. It may be worn on active Red Cross service or when on duty in U. S. Public Health Hospital service.

SECOND: When worn with the white or grey uniform it may be used to fasten the collar in front. When worn with the outdoor uniform it may be used to fasten the collar of the blue silk or flannel waist, or it should be worn two inches below and three inches to the left of the lower left hand point of the collar.

THIRD: It may be worn at a Red Cross function with outdoor clothes or evening dress.

The large number of requests for duplicate pins leads us to believe that these regulations are being disregarded. Information has also reached us stating that men and women, even of questionable character, have been seen wearing them. Please remember that this badge is symbolical of service and should be carefully safeguarded. Will you not do your share to help?

LANTERN SLIDES ON HOME HYGIENE NOW READY FOR RELEASE

Twenty slides with captions depicting the methods taught in the course on Home Hygiene and Care of the Sick can now be secured from the Division Bureaus of Publicity, American Red Cross, upon request. These slides have been especially prepared by the Bureau of Home Hygiene and Care of the Sick, Department of Nursing, for use in rural sections where motion picture films are not obtainable, in schools, clubs, factories, industrial homes and colleges.

They are intensely interesting. Each one shows the theories of the text book set forth in practice. There are pictures demonstrating how to give a hot mustard footbath to a patient confined to bed; how a patient's gown may be changed without discomfort; the proper

application of moist heat and how to prepare a hot stupe; the proper manner in which to turn the corner of the sheet in making a bed so that all the bed clothes may be secure; the way to bathe and dress the baby; the proper manner to change a helpless patient's position in bed; how a bed bath may be given with ease and comfort; what to do in case of croup; the proper way to sterilize baby's bottle and prepare his food; the right way to fill a hot water bottle; and the Red Cross way of alleviating suffering in the home generally.

For those who wish to protect themselves and families from preventable diseases and to know how to give intelligent care to ill members of their families in the absence of a trained nurse, the Red Cross text-book on Home Hygiene and Care of the Sick has been written. The slides setting forth instances of the theories in practice have been prepared to demonstrate how simple and valuable these remedies are, and to recruit new members for the classes of study. To quote the preface of the text-book: "With nurses becoming more difficult to secure, the safety of the family demands that some member in each household know enough about elementary nursing to make a patient comfortable and to carry out accurately the instructions of the physician."

Boxes have been constructed in which these slides can be transported to their destination by express. They may now be had for a small rental fee.

GEORGIA M. NEVINS RESIGNS

After nearly three years' of Red Cross service, the resignation of Miss Georgia M. Nevins, Director of the Department of Nursing, Potomac Division, has been accepted with keen regret by the American Red Cross.

Miss Nevins took an active part in the organization of the Army Nurse Corps and in the fight to secure military rank for Army Nurses during the past war. Red Cross service claimed her attention in 1908, which was before the late Jane A. Delano, a close personal friend, was associated with this organization. She was asked by Mabel T. Boardman to take one of the first classes in Home Hygiene and Care of the Sick, then being organized by the Red Cross.

Because of her close affiliation with the American Nurses' Association, and the National League of Nursing Education, Miss Nevins in 1909 was elected secretary of the first National Committee on Red Cross Nursing Service, of which she is still a member. In November, 1917, she was appointed Director of the Department of Nursing of the Potomac Division. Nellie F. Oxley, Director of the Bureau of Public Health Nursing, Potomac Division, has been appointed Acting Director of the Department of Nursing.

DEPARTMENT OF PUBLIC HEALTH NURSING

IN CHARGE OF

EDNA L. FOLEY, R.N.

TEXAS.—The State health officer is required by law to call a conference of all county and city health officers once a year. When he called the last one, in April, 1920, Mrs. Ethel S. Parsons, Director of the Bureau of Child Hygiene and Public Health Nursing of the Texas State Board of Health and of the Public Health Nursing of the American Red Cross (Texas), called the state public health nurses together at the same time. The attendance included 40 nurses and 150 physicians. Common problems were very frankly discussed, a new feeling of friendliness and need of one another was established and late in the second day the doctors voted to include all the public health nurses of the State Department of Health and the American Red Cross, in the membership of their organization; Mrs. Parsons was made first vice-president. An organization of this sort cannot but advance the health program of Texas and it would not be a bad plan for other states to borrow the idea.

The Texas State Board of Health has adopted a copy of Standing Orders very much like those used by the Visiting Nursing Association of Chicago. Whenever a new state nurse is appointed, the State Health Officer sends these orders and the following "Don'ts for the Nurse" to the local health officer, asking his approval of their use by the nurse.

In fifty instances, forty-nine health officers approved of the orders, but the fiftieth said he believed the nurse should be given more leeway. The "Don'ts" are just as good for nurses in other states as for those in Texas, therefore they are copied as follows:

DON'T diagnose case; use "suspected" before name of disease.

DON'T catheterize without a doctor's order.

DON'T forget that you are the nurse, and not the doctor.

DON'T use gargle until after physician has seen throat.

DON'T send any patient (except on emergency) to the hospital without first consulting the physician on the case.

DON'T leave a note in patient's home asking for diagnosis or inquire over the telephone, if you have any reason to believe that physician will refuse a diagnosis. Explain three reasons for careful diagnosis: (1) To enable us to give as careful nursing care as is indicated; (2) To protect the nurse from the dangers of infection to others and to herself; (3) To enable us to show by carefully kept statistics the kind of cases under our care, and the approximate amount of nursing service required by the different types of case.

CONNECTICUT.—An attractive Health Center has just been opened in the City of New Haven, for free examination, consultation and

advice. Patients will be referred from it to their own physicians or to the Visiting Nurse Association. The Center will serve three city wards and is organized and supported by the Department of Health, the Visiting Nurse Association, the American Red Cross and the New Haven Medical Association. The coöperation of four such important agencies as these cannot fail to bear lasting and worth while results. Other cities may well take notice of this big step in advance taken by the New Haven health agencies.

OHIO.—The State Anti-Tuberculosis Association has recently changed its name to "The Ohio Public Health Association." It has a Department of Public Health Nursing, of which Hulda Cron, formerly with the Cleveland Visiting Nurse Association, is supervisor. The state is divided into five districts, each with its own supervisor. The Association has a library from which any nurse may borrow the most recent books on public health subjects. The public health nurses throughout the State of Ohio have always been famous for their warm coöperation with the State Department of Health and the State Anti-Tuberculosis Association, and every year this coöperation is growing more securely cemented.

MONTANA.—Grace Westerman, formerly with the Visiting Nurse Association of Chicago, is American Red Cross County Nurse with headquarters at Glasgow. In June she traveled a thousand miles in her motor and visited twenty-four schools. This coming year she has been asked to give the American Red Cross course in Home Nursing to the girls in the Glasgow high school.

ILLINOIS.—By the recent will of Mrs. John C. Black, the Visiting Nurse Association of Chicago was left \$250,000.00. The Children's Memorial Hospital was left a similar sum and in addition will receive the balance of the estate when all other bequests are paid. It is now estimated that this sum will approximate half a million.

The three nurses of Whiteside County held a weighing and measuring contest at the County Fair recently. In a little booth in Floral Hall, decorated with attractive posters on the care of infants, 82 babies were weighed, and in a rest tent outside, nearly 700 children were weighed and measured. The parents of the latter were particularly interested and a good many wanted to subscribe to the Red Cross then and there, for the tent was in charge of the Red Cross County nurses. Evangeline Mosher, the first Red Cross nurse in Whiteside County, has 62 schools, and half a county, under her supervision. Only five of these schools are in towns, but in all, the attendance is 5,000 children.

NEW YORK.—Matilda Johnson, formerly Superintendent of the Visiting Nurse Association of Cleveland, too well known to thousands

of nurses throughout the country to need further introduction, has been appointed Superintendent of Nursing of the Metropolitan Life Insurance Company, with headquarters in the New York office. Miss Johnson succeeds Eleanor Bridgeland, who was married last February to Frank Snowden Thomas, of New York City.

A Seamen's Service Center, directed by the United States Public Health Service in coöperation with the American Red Cross, has recently been opened at 21 Coentes Slip, New York City. Public Health nurses will be especially interested in this Center because a public health nurse is constantly on duty to advise or talk with the sailor boys and the Center was established under the direct supervision of Anne Doyle, Supervising Nurse with the United States Public Health Service. In the little slip that is given to all seamen, they are told what the Center means to them and also that they may see their physicians, who will send them, when necessary, to the proper hospital or clinic. They are further told that if they are ill in a hospital or boarding house and the Center is notified, a nurse will visit them to see that their affairs are taken care of during their illness and that arrangements for their convalescent care are made. Legal advice, library books, writing material and other comforts are provided for the men. The Center is open day and night, and seamen of all flags are entitled to its service without charge.

WISCONSIN.—The Visiting Nurse Association of Beloit, Mrs. Justine L. Thorpe, superintendent, opened a weekly nose and throat clinic in January and now every Wednesday afternoon is devoted to throat operations. The children are kept for several hours and are then taken home in the ambulance and an evening call is made on each one. An Infant Welfare conference with a weekly attendance of from fifteen to twenty babies, and a weekly Tuberculosis clinic, during which milk is served to waiting children, are two of the features of the work of this progressive little society. The headquarters of the Visiting Nurse Association are at 422 Republic Avenue. The record forms recommended by the National Organization for Public Health Nursing are used. The staff of the Association has grown to two nurses.

The next examination of the Louisiana Nurses Board of Examiners will be held in New Orleans and in Shreveport, December 13, 14 and 15. For further information apply to Dr. J. S. Herbert, Secretary, 1121 Maison Blanche, New Orleans.

HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

IN CHARGE OF
ALICE SHEPARD GILMAN, R.N.

STUDENT GOVERNMENT

BY JEAN I. GUNN, R.N.

(Continued from page 48)

In the student government as it is worked out in our school, I think the nurses have—I do not want to say a higher sense of honor, because I do not know that they have—but I might say a more active sense of honor than they had before. In the days before we had student government the students, if they came in a little late and the training school office did not know about it, did not feel in honor bound to come and tell me personally that they were ten minutes late coming in, and I do not think they really thought that was dishonorable. They did not give it very much thought. Now every one knows that if she comes in late, she has to report to her proctor, and so on, and it makes them think about those little things very much more than they ever thought before.

It has also, undoubtedly, developed their initiative, and that is one of the things we need to develop in our training of nurses. Any training that turns out nurses all alike is not training as we would wish it to be.

It has also developed their executive ability; it has given them more poise, more self-confidence. It has developed a very much better understanding between the students and the graduate nurses on the staff. I think the graduate nurse is beginning to look on the pupil nurse as a student, and that is a great asset.

It also encourages free discussion of all difficulties in training school life, in their student days. If we want to get near our students, I really think we have to know their difficulties and we have to have them feel that we sympathize with them. To us their difficulties may seem very small, very trivial, but if we will look back at our student days, we will realize that to us they were real difficulties and real problems.

I can say with the greatest confidence that it has developed much better discipline in the school than we ever had before, and I think that is due to what I said a few moments ago, that the students feel the responsibility to their fellow students far more than they feel it to the training school office and the officers of the school.

Another thing that it has done for the students is to give them a distinct training in parliamentary procedure. They conduct their meetings in a very parliamentary way. It also makes them feel that they are a part of the association, and they enter into the discussion very much more freely than one would think. This is developing more and more as we go along. We find that discussion in their general meetings is really very general, and that is one thing that we need to develop in our graduate nurses' associations. In a convention such as this, one outstanding feature is that so few nurses enter into the discussion.

The Social Committee has been a very great asset to the residence life of the pupils. The old saying that everybody's business is nobody's business applies to this. In a school where you have not a Social Committee, or where there is no one personally responsible for fostering the social life, very little is done, because everybody waits for somebody else to do it. Where there is a social committee, it is its responsibility to organize social functions for the nurses. I do not mean formal receptions and that sort of thing, although they have them, but simple musicales and things that they may easily have in their residence life. We have had also more recreation among the pupils. I think they have played tennis more since we have had a social committee than ever before, because the Social Committee in the spring organized a tennis club, and there is just a little spur behind the nurses to make use of the tennis courts.

It has also been the instrument, if I may use that word, of developing our library, because in getting very much interested in home life, the nurses have more and more felt the need of a library. We had this year a donation given us for that purpose. In the old days, although the superintendent of nurses or some member of the graduate staff would have enjoyed compiling the list of books for that library, it was now all done by the students, and anything the students have to do, they take much more interest in. They then know that those books are in the library and that they have asked for them, and it stimulates their interest very greatly.

I may say in passing that a student of our school attended the Student Volunteer convention and as a result, we have organized recently the Y. W. C. A. work in the school. That has all been done by the students, assisted by the officials of the Y. W. C. A. in the city. The student body, as a whole, asked to have something more in their student life than they were having. They felt that they needed something of a religious nature in their student days. For that reason, first of all, they started a simple song service on Sunday evening for the nurses who were on in the late afternoon hours, but it has

developed now into the Y. W. C. A. sending in leaders for study groups which meet once a week.

If any of you are thinking of developing student government, there are a great many things that will discourage you, and I think one reason student government has not succeeded in some schools is because the students have not been given full authority. If you give student government with a string on it, I think it is impossible to make a success of it. The students lose interest, they feel that they are allowed to settle things that do not matter, but when it comes to some important decision it is taken over by the officials of the hospital. I think one of the things that is hardest to do is to give the council full authority in the residence life, because every superintendent of nurses feels that she can settle the difficulty much better than the Student Council can, and there is a tendency on the part of the superintendent to unconsciously exercise the authority that she always exercised in the past. If that is done, the plan is doomed to failure from the beginning.

In educating the graduate nurses on the staff, the superintendent of nurses should not fail to educate herself, and I may say that is one of the hardest things that she has to do. She has to get an entirely different viewpoint of the students' life, and it is not easy after a superintendent has controlled a school for years, to suddenly change her ideas. But you have to start with an open mind on the part of the superintendent of nurses or the student government is not likely to succeed.

If student government is organized in any school, if the superintendent of nurses has an open mind and gives the students full control of their residence life, full control of any question that may arise, and if the active coöperation of the graduate nurses is secured, I feel sure that the plan for student government will prove successful. I feel very strongly that if we trust our students they will not fail us.

The *Bulletin* of St. Luke's Hospital Alumnae, New York City, in its October number, pays tribute to the memory of Sophia F. Palmer: "Miss Palmer is not dead—she lives in a work well founded, in council wisely given and in the example of womanhood that we proudly and reverently remember. * * * and the *Bulletin* wishes to add its tribute to a noble woman."

NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

ELISABETH ROBINSON SCOVIL

A SUGGESTION IN HOSPITALS.—The *Journal of the American Medical Association* says that the first unit of a cottage hospital plant has just been completed for Roosevelt Hospital, Pasadena, California. The plan includes the development of a hospital with the addition of cottage units as needed, also of private cottages for patients who need special accommodations.

DEATH OF PROFESSOR ADAM POLITZER.—The celebrated Viennese aurist, the inventor of the Politzer bag, died a short time ago of apoplexy. He taught a large number of foreign students and his ear clinic was perhaps the most celebrated in the world.

ANCIENT SURGICAL INSTRUMENTS.—A set of thirty-six Greco-Roman surgical instruments found at Kolophon, in Asia Minor, have been presented to the Archeological Museum of Johns Hopkins University, Baltimore.

GASOLINE FOR REMOVING ADHESIVE PLASTER.—A correspondent of the *Journal of the American Medical Association* recommends the use of gasoline to remove adhesive plaster. A drop of gasoline from a medicine dropper inserted under a corner of the strip will loosen an inch or more and the process is repeated as long as is necessary. A small gauze sponge can be used if desired.

RECTAL EXAMINATION IN LABOR.—The *Illinois Medical Journal* has a plea for the substitution of rectal for vaginal examinations in labor. The danger of puerperal infection is stated to be in direct proportion to the number of vaginal examinations and the lack of an aseptic environment.

TREATMENT OF RINGWORM.—The *Lancet* reports the successful treatment of ringworm by washing the affected part very thoroughly with soap and water and then painting it with iodine. When perfectly dry the area painted is sprayed with a small quantity of ethyl chloride. The treatment is repeated twice a week.

PLATE FOR CLEFT PALATE.—The *Journal of the American Medical Association* reports the satisfactory result obtained by an Italian physician with a rubber plate, made according to dentistry technic, in two cases of cleft palate. The child was able to nurse almost normally. A string attached to the plate was tied around the ear.

LETTERS TO THE EDITOR

The editor is not responsible for opinions expressed in this department. All communications must be accompanied by the name and address of the writer to ensure publication.

ARMY STUDENTS

Dear Editor: "What hours are you having off to-day, Polly?"

"Oh, nine-thirty till one," draws a pleasant faced girl in blue (a "blue bird," in fact), coming down the hall. "Class from ten till eleven and oceans of work to do on the ward," and she strolls on to her "haven of rest," her room, while the evening nurses laugh and resume their respective naps or conversations. They've all had their turn at it, overcrowded wards and long, hard days of work, but laughing seems to be a habit nurses acquire, and for the most part, they thrive on it, too. Now the Army students, rather, Bluebirds, as they were known in the camps, do not mean to complain in any sense of the word, but they do have a few troubles. Scores of the Bluebirds are affiliated with civilian hospitals for special training, but during this course of training they frankly sever connections with the Army. For eight months they abide by the rules of the institution to which they have been sent. At Barnes Hospital, St. Louis, for instance, they work eight hours day or night along with the other students, without remuneration. The hospital students have uniforms provided, but the Army students arrive fully equipped. It's not that the Bluebirds don't enjoy working and working hard, but after training for twenty months, why should the Army students depend on home folks for "stamp" money? Several of the students are already looking forward to a month's furlough in the very near future and some of the girls will have to travel as far as Texas, New York and South Dakota. The Bluebirds readily agree that there is nothing to compare with the Army School of Nursing, yet three years is a long stretch, considered financially. Within two years the Fort Sam Houston group of more than sixty girls has decreased to something over twenty. Several of the girls only came in for the emergency during the last few months of the war, but many remained for a year and longer before resigning. While matrimonial reasons were advanced by several, some of the remaining number returned home and continued to nurse,—specializing typhoid cases, etc., at thirty and more per week. Lately there has been cause for a real "flutter" among the Bluebirds. A girl from Wisconsin, who responded to the emergency call for nurses in 1918, has received a bonus of more than one hundred and fifty dollars. What about the other states?

A BLUEBIRD.

(In response to an inquiry to the Dean of the Army School of Nursing on the subject of this letter, the following reply was received: "The announcement of the Army School which is sent to every student, states that a monthly allowance of \$15.00 is provided except for the period of affiliation. The arrangements with the affiliating hospitals provide that board, lodging, and laundry, and such allowance, if any, as is given their students, will be given the students of the Army School of Nursing. If students are sent to a hospital which does not provide an allowance for its own students, the students of the Army School receive no allowance while at that hospital. No instance is known of the affiliation with a civilian school which provides an allowance for its own students and none for the students of the Army School. Since July, 1920, the allowance from the Government to student nurses of the Army School has been increased from \$15.00 to

\$24.00 a month. The students did not receive this increase immediately, but are being paid now the increase from that date. New students who are entering the School this fall will not receive the increase of \$9.00 a month until the completion of their four months' probationary period.")

JOURNALS ON HAND

Dear Editor: I have volumes 1910-1919 of the JOURNAL complete and would be glad to dispose of them. Volumes 1910-1915 are bound.

ELLEN STEWART.

The Tuberculosis League, 2851 Bedford Avenue, Pittsburgh.

JOURNALS WANTED

THE AMERICAN JOURNAL OF NURSING needs copies of the JOURNAL for November, 1911, and for January, 1912, to complete a set waiting to be bound. Please send them to the JOURNAL office, 19 West Main Street, Rochester.

NOTE:—A letter from Cedar Rapids, Iowa, cannot be published because the name of the writer does not accompany it.

ARRANGEMENT OF HOURS OF DUTY FOR TWO NURSES

I.

Dear Editor: I have found that the midnight change for nurses gives each a part of the day for exercise, as so many nurses find it difficult to sleep during the daylight hours. I have had no objection made by family or doctor.

Alabama

M. G. W.

II.

Dear Editor: Of course a nurse wishes to please the family and doctor, but my experience has been that they will say, "Arrange the time to suit yourselves." About one nurse out of a hundred really likes night duty; it isn't natural that one should, so why not be considerate of each other by sharing the vigil of the night? It can be done by dividing the time into eight-hour duty which gives each nurse a night's rest every other night and hours for recreation in the sunshine, both essential to keep the nurse interested and alert. If nurses work in harmony, eight-hour duty can be arranged very nicely and is less tiresome than the long stretch of twelve hours.

North Carolina

M. A. L. W.

(We understand this correspondent to mean that each nurse would have two eight-hour periods on one day, and one eight-hour period on the succeeding day.—Ed.)

III.

Dear Editor: Having done private duty for twenty years, I have always found it satisfactory for the nurses themselves to arrange hours on duty, the first nurse on the case having the choice of time. The doctor is not acquainted with the routine of the household, and the average patient is not familiar with the arrangement of time off duty for the nurse.

New Jersey

M. B.

IV.

Dear Editor: I think it can in most cases be left to the nurses, but I am sorry to say I have found some nurses who are not one bit obliging or reasonable about it. They want either day or night duty. So often a nurse is a poor sleeper in the day time that I think if two nurses have every other night on duty, it seems a good division. This will mean that one nurse is on duty from ten p. m. until eight a. m., and the nurse who comes on duty has had her breakfast and stays until two p. m. The nurse who comes on duty at two p. m. has had her dinner and is off duty until ten p. m. Thus, the family only relieves a nurse for one meal, supper. I had no trouble with this arrangement where I formerly nursed. It evens things up, as every other morning one has the bath to give and the general care of the patient, and has also to give the patient his dinner. However, some nurses have looked with scorn on this programme and have even called it "messy." The patient or the family seldom raise any objection. I think as long as the nurses have to do the work, it should be left to their decision. May I also add that I believe heartily with Z. L., that a nurse should have a cot in the patient's room, even if she does twelve-hour duty.

Massachusetts

M. A. M.

SCARCITY OF PRIVATE DUTY NURSES

Dear Editor: This prosperous community was used before the war to having a special nurse for each case of even moderately severe illness, and since the war so many of our local nurses have married or have accepted institutional positions that we have not enough to supply the demand. So many of the local physicians appeal to this hospital for assistance, which we have always given very freely, in securing special nurses for them, that we keep the remaining nurses of the community constantly busy and are compelled to call for nurses from all cities in a radius of eighty miles. This need for nurses has pressed upon us so heavily that we are impelled to ask the JOURNAL readers to consider this community as a field for their labors.

McKitrick Hospital, Kenton, Ohio

A. S. MCKITRICK, M.D.

A new hospital for mental diseases is being organized at Marion, Indiana, and will be ready to receive three hundred ex-soldiers early in November. All types of mental disease will be treated. The personnel for the hospital is being selected with great care and a corps of sixty nurses has been authorized. Although the absence of women and children among the patients makes it impossible to give a full training for the degree R.N., well planned courses of training in modern psychiatric nursing will be organized for pupils from affiliating general hospitals and for graduate nurses who desire to secure a training in mental nursing. The occupation and physiotherapy department will also have facilities for practical training, and in the social service department pupils from recognized schools of social work will be given an opportunity for practical experience under supervision. Applications are now being received by Dr. Frank F. Hutchins, Medical Director and Superintendent of the Sanatorium.

NURSING NEWS AND ANNOUNCEMENTS

News items must be received at the JOURNAL office by the 15th of the month in order to ensure publication in the JOURNAL of the following month.

NURSES' RELIEF FUND, REPORT FOR SEPTEMBER, 1920

Receipts

Previously acknowledged	\$ 5,705.02
Interest on bonds	40.00
California: Children's Hospital Alumnae Assn., San Francisco, \$20; Mrs. C. D. Lockwood, Pasadena, \$15	35.00
Canal Zone: Ancon, Anna R. Turner	10.00
Colorado: Kate Moyer, Rocky Ford	1.00
Michigan: Kate Todd, Marquette	1.00
Minnesota: State Nurses' Assn.	6.00
New Jersey: Margaret M. Whitecraft, Rahway, \$1; Elizabeth Pierson, East Orange, \$2; Emilie Wilkins, Silver Lake, \$2	5.00
New York: Lina Lightbourne, Adams	50.00
Ohio: Aultman Hospital Alumnae, Canton, \$2; Mary Catlin, Youngs- town, \$1; Anna C. Barron, Warren, \$1; Merle Perry, Andover, \$2; Winifred Campbell, Canfield, \$1	7.00
Pennsylvania: Shenango Valley Hospital Alumnae, New Castle	25.00
Tennessee: State Registered Nurses' Assn.	14.00
Utah: Bessie Lawrence, Salt Lake City	5.00
Washington: State Nurses' Assn.	20.00
West Virginia: Graduate Nurses' Assn.	11.00
France: Helen Scott Hay	50.00
Interest on Third Liberty Loan bonds	85.00
	\$6,070.02

Disbursements

Sent to fifteen applicants	\$245.00
Postage and stationery	42.50
Exchange on cheques50 288.00
	\$ 5,782.02
Invested funds	26,300.00
	Total, October 1, 1920
	\$32,082.02

Contributions for the Relief Fund should be sent to Mrs. C. V. Twiss, Treasurer, 14 East 50th Street, New York, and the cheques made payable to the Farmers Loan & Trust Company. For further information, address E. E. Golding, Chairman, 317 West 45th Street, New York City.

M. LOUISE TWISS, *Treasurer.*

**MEMORIAL FUND FOR THE NIGHTINGALE SCHOOL,
BORDEAUX, FRANCE**

(Contributions received up to October 15, 1920)

Previously acknowledged ---\$46,444.55	New York -----	82.75
(Also 240 francs)	Ohio -----	15.00
Connecticut -----	Pennsylvania -----	261.97
District of Columbia -----	South Carolina -----	5.00
Iowa -----	Texas -----	45.00
Illinois -----	Vermont -----	5.00
Indiana -----	Virginia -----	5.00
Kansas -----	Washington -----	20.00
Maryland -----	Wisconsin -----	80.00
Michigan -----		
Minnesota -----		
		<hr/> \$47,341.37

Checks and money orders should be made out to the AMERICAN JOURNAL OF NURSING and should be mailed to the JOURNAL at 19 West Main Street, Rochester, N. Y., accompanied by a letter stating that the contribution is for the Nurses' Memorial Fund.

ARMY NURSE CORPS

On October 10, Major Julia C. Stimson, Superintendent, Army Nurse Corps, left for St. Louis, Missouri, to make a tour of inspection at the following named stations: Jefferson Barracks, Missouri; Camp Pike, Arkansas; Army and Navy General Hospital, Hot Springs, Arkansas; Fort Sam Houston, Texas; Fort Bliss, Texas; Letterman General Hospital, San Francisco, California; Fitzsimons General Hospital, Denver, Colorado; Fort Riley, Kansas; Fort Leavenworth, Texas; Fort Sheridan, Illinois; Fort Totten, New York. Major Stimson expects to delay at San Francisco, California, for a period of ten days to arrange for affiliations in civilian hospitals for the Army School of Nursing, and particularly for the opportunity for the study of Public Health Nursing. Major Stimson will be accompanied on her tour by her secretary, Eleanor M. Welles. She expects to return to Washington, D. C., on or about the tenth of November. Matters of urgent importance relative to the Army Nurse Corps will be discussed by Major Stimson with the Commanding Officers and Chief Nurses of the hospitals mentioned relative to the recent legislative changes which have affected the Army Nurse Corps, such as Relative Rank, increased pay, changes in Army Regulations, and change of uniform for Army Nurses which has recently been approved.

Two large General Hospitals, O'Reilly, at Oteen, North Carolina, and Hoff, at Staten Island, New York, are being abandoned by the U. S. Army and taken over by the Public Health. Miss Keener, the Chief Nurse at Hoff General Hospital will be transferred to Coblenz, Germany, on the transport leaving New York November fifth. She will be accompanied by First Lieutenant Elizabeth D. Reid, Chief Nurse, Army Nurse Corps, until recently Chief Nurse at Fitzsimons General Hospital, Denver, Colorado. First Lieutenant Mary E. Sheehan, Chief Nurse of O'Reilly General Hospital, has been transferred to Fort Totten, New York, for assignment to duty as Chief Nurse of the Station Hospital there. Miss Sheehan will be in charge of all nurses going to and from Germany, and all nurses who are now on transport duty between New York and Antwerp, Belgium. She will also have supervision of the nurses on duty in the Attending Surgeon's Office, New York City, and take charge of the arrangements made for

the affiliations of student nurses in the Army School of Nursing in the civilian hospitals in and around New York City.

On October 1st, Lawson General Hospital, at Fort McPherson, Georgia, and Lovell General Hospital at Fort Sheridan, Illinois, were discontinued as General Hospitals and began functioning as Station Hospitals.

The following Chief Nurses were transferred during the month: First Lieutenants Lillian J. Ryan, from Camp Taylor, Ky., to Fitzsimons General Hospital, Denver, Colo.; Edyth M. Gill, from Nogales, Ariz., to Camp Lewis, Wash.; Amelia I. Goodine, from Walter Reed Hospital to Nogales, Arizona; Reba Cameron, from Fort Sam Houston, Texas to Jefferson Barracks, Missouri; Anjeanette Wager, from Jefferson Barracks, Missouri, to Camp Eustis, Virginia; Mary B. C. Reebel, from Camp Lee, Virginia, to Letterman General Hospital, San Francisco, Calif., to await transportation to Manila, P. I.; E. Valine Messner, from Fort Logan, Colorado, to Manila, P. I.; Sara E. Halloran, from Camp Dodge, Iowa, to Columbus Barracks, Ohio; Helen M. Pickel, from Carlisle, Pennsylvania, to Letterman General Hospital, San Francisco, California; Miriam Cleghorn, from Fort Thomas, Kentucky, to Fort Logan, Colorado; Margaret E. Clarke, from Camp Gordon, Georgia, to Fort Sill, Oklahoma; Jane G. Molloy, from Camp Devens, Massachusetts, to Fort Thomas, Kentucky. First Lieutenants Elizabeth J. Kenny and Rae D. Landy, Chief Nurses, Army Nurse Corps, now on duty in Coblenz, Germany, will return to the United States on or about the first of the year.

The following named Second Lieutenants, Army Nurse Corps, were transferred from the Reserve to the Regular Corps: Florence Clement, Sara McLoughlin, and Sara Riley. The following named Second Lieutenants were appointed into the Corps: Maude Helen Hager and Anna M. Beckman.

SAYRES L. MILLIKEN,

Captain, Assistant Superintendent, Army Nurse Corps.

For and in the absence of the Superintendent.

NAVY NURSE CORPS

The work of nurses in the Navy in connection with the Hospital Corps training schools has received an impetus due to increased enlistments in this branch of the service and the possibility of establishing a more clearly defined policy with regard to the length of time the students of a hospital corps will remain in the schools. The Newport Training Station was the first to receive qualified Navy Nurses in the capacity of teachers. Since that time, nurses have been assigned to the Pharmacist's Mates' School at Hampton Roads, and recently to the Training School of Goat Island, California. Enthusiastic reports are received from the last named school, and the following excerpt from a Chief Nurse's letter will be of general interest to those who are not cognizant of the type of young men required for this important work in the Navy: "All of our co-workers in the Medical Department are deeply interested and there is a splendid *esprit de corps*. Our pupils are fine types of American lads who are entering the work with great enthusiasm. Their weekly examination papers show that they are not only deeply interested, but that they give such unusual attention to details that their professional progress is regarded as most encouraging. Our school is literally growing like a mushroom and we expect there will be three hundred students in the near future, averaging about fifty lads in each of our six classes." Certain departments of the government have recognized that prolonged service in the isolated or tropical stations is not beneficial to the individual and it is only in

response to a personal request that the period of duty of nurses at such stations extends beyond two years. That the government does not treat all employees alike may be noted from the following quotation from the letter of the Chief Nurse in Samoa: "A new American Consul came down in July for Upolu to relieve ——— who has been there eleven years. The Consul is very young; he was entertained at our Government House for forty-eight hours before going to Upolu; and when the *U. S. S. Fortune* took him over to the Island, the Governor invited Miss ——— and me to go at the same time in status of duty. The trip was very rough but we had a delightful time after arriving and we were entertained at afternoon tea by the Administrator from New Zealand, who lives at Valiema, Stevenson's old home, so beautifully situated on a mountain commanding a wonderful view of the surrounding country. At a time when a general unrest seems to affect the nursing profession and those who are laboring for higher ideals are somewhat discouraged, there may be found a message in the following quotation from the letter of a government pioneer nurse: "The transition from pay at \$30.00 per month, 16c ration, expenses for laundry, and twelve hours' duty daily, to \$72.00 pay for month, liberal subsistence, comfortable quarters, paid laundry expenses, and less than eight hours daily duty, marks some progress; when I hear nurses complaining, I am apt to lose all patience and to question: 'Are you sufficiently concerned with what you give to the Government which really repays you liberally?'"

The following Nurses, U. S. N., have been appointed and assigned to the naval hospital at the station indicated: Ellen Drisko from Somerville, Mass., to Chelsea; Leah M. Janson from Brooklyn, N. Y., to Washington; Ella V. Parrott (from reserve) to Chelsea; Josephine Rugg from Berkeley, California, to San Diego; Bessie A. Van Winkle from Philadelphia, Pa., to Quantico.

The following Reserve Nurses have been appointed and assigned to the naval hospital at the station indicated: Maude F. Essig, New York, N. Y., to Annapolis; Lucy E. Howard, Chicago, Ill., to New York; Signa E. Lindquist, Los Angeles, Calif., to Mare Island; Roselee Rochon, Brattleboro, Vermont, to Newport; Carolyn O. Speas, Pfafttown, N. C., to Washington.

The following chief nurses have been transferred: Anna G. Davis, Annapolis, to League Island; Nell I. Disert, Mare Island, to Canacao, P. I.; Carrie H. Lappin, New York, to League Island; Edith N. Lindquist and Eva B. Moss, Parris Island, to New Orleans and Washington; Sara B. Myer, League Island, to Fleet Supply Base, New York; Emily M. Smaling, Aircraft Dispensary, Philadelphia, Pa., to Parris Island; Frances L. Winkler, League Island, to Annapolis.

The following nurses have been transferred: Bertha A. Adams, Great Lakes, to Guam; Kathryn Marie Bonner, League Island, to Newport; Nellie O. Boothby, Great Lakes, to Guam; Josephine Croghan, Washington, to Quantico; Agnes Distler, Great Lakes, to Guam; Besse M. Dunlap, Quantico, to Mare Island; K. M. Gallagher, Marine Quartermaster Depot, Philadelphia, to Annapolis; Violet S. Gass, Aircraft Dispensary, Philadelphia, Pa., to Parris Island; Frances V. P. Haines, Key West, to New Orleans; Estelle Harding, Guam, to Canacao, P. I.; Ellen M. Hodgson, Newport, to League Island; Julia T. Johnson, Annapolis, to Guam; Margaret E. Jones, League Island, to Newport; Elizabeth J. Keavey, Guam, to Canacao, P. I.; Marie E. Kelly, Norfolk, to Great Lakes; Mary A. Kief, San Diego, to Puget Sound; Josephine Knight and Annie Leighton, Washington, to Newport and Fort Lyon; Catherine McNelis, Guam, to Canacao, P. I.; Mary Mahoney, New York, to Newport; Anna E. Mears, Newport, to League Island; Olive M. Houghton, League Island, to Newport; Mary Moffett, Canacao, P. I., to

Pearl Harbor; Anna M. Moran, Newport, to League Island; Mary Agnes Mulcahy, Mare Island, to Washington; Mary E. Northrop, Great Lakes, to Guam; Mary T. O'Connell, Fleet Supply Base, New York, N. Y., to New York; Mary Peoples, League Island, to Newport; Dorothy W. Pierce, Norfolk, to Great Lakes; Lena A. Richardson, Chelsea, to Mare Island; Edna S. Smith, Newport, to Chelsea; Mary A. Snyder, Newport, to League Island; Elizabeth Steiner, New York, to Newport; Mary Tormey, Mare Island, to Guam; Madeline E. Wall, New York, to Newport; Margaret M. Welsh and Ada L. Wood, Mare Island, to Canacao, P. I., and Puget Sound; Mary P. Young, New York, to San Diego.

Honorable Discharges: M. Ada Allen, Mare Island; Mary P. Nicholls, Parris Island.

Resignations: Mary E. Eskridge, New York; Mary F. McCarthy, Chelsea; Delia B. Mead, Mare Island; Edith A. Shilling, League Island.

Reserve Discharges: Blanche Allen, Washington; Ruth Courtney, New Orleans; Ella V. Parrott, Chelsea (Transferred to U. S. N.); Elizabeth M. Thomas, Fort Lyon (Medical Survey); Thea Thomsen, Mare Island.

Reserve Inactive Status: Alice E. McGuire, Parris Island; Alice M. Roach, Chelsea; Nellie F. Treuthart, Charleston.

U. S. N. R. F.—Disenrollments: Dorothea Easterly, Mare Island (Medical Survey).

Promotions to Grade of Chief Nurse: Louise A. Bennett, Hampton Roads; Edith N. Lindquist, Parris Island.

LENAH S. HIGBEE,

Superintendent Navy Nurse Corps.

U. S. PUBLIC HEALTH SERVICE NURSE CORPS

Promotions and Resignations for September, 1920.—Irene Jennings, Perryville, No. 42, promoted to Chief Nurse, U. S. Marine Hospital No. 3, Buffalo, N. Y.; Helena Krause, Cohoes, N. Y., appointed Chief Nurse, Memphis, Tenn.; Nona Charles, New York City, appointed Chief Nurse No. 30, Chicago, Ill.; Lulu Wolfe, Assistant Chief Nurse, Dansville, N. Y., promoted to Chief Nurse, Belvedere Infirmary, New Orleans, La.; Mary Sullivan, Chief Nurse at Memphis, transferred to Chief Nurse, Tucson, Ariz.; Katherine Taulbee, Chief Nurse, Tucson, transferred to Chief Nurse, Louisville, Ky.; Henrietta Myers, Chief Nurse, Key West, transferred to Chief Nurse, Mobile, Ala.

The Public Health Service proposes to give a Post Graduate Course in Psychiatry to nurses from general hospitals, who are eligible for appointment in the Nursing Service, and at the completion of this course, these nurses will receive the increase in compensation authorized for nurses in Neuro-psychiatric Hospitals, provided they serve in such hospitals. The course will include, in addition to special lectures, practical instruction in methods of restraint and control, hydrotherapy, electrotherapy and occupational therapy. A working knowledge only for these is necessary, since it is not intended or desired that nurses should encroach in any manner on the Department of Reconstruction, but it is considered essential that they should have an intelligent working knowledge of these therapeutic measures, so as to be able to assist the patients in their occupational work and to observe at all times the effect of treatments and occupational work on the patient. A certificate signed by the Surgeon General of the U. S. Public Health Service will be given upon completion of the course, which will extend over a period of three months. Nurses taking this course will be expected to serve as staff nurses during their period of instruction, with sufficient time allowed in

which to take their lectures, special instructions, and for study. Applications for this course should be made to the Surgeon General, U. S. Public Health Service, Washington, D. C., Attention Nursing Department.

LUCY MINNEGERODE,

Superintendent of Nurses, U. S. P. H. S.

THE AMERICAN HOSPITAL ASSOCIATION

The twenty-second annual convention of the American Hospital Association was held at the Windsor Hotel, Montreal, October 4-8, with a total registration of 910. The address of the President, Dr. Howland, brought out the following as advanced steps: the formation of geographical organizations as part of the Association, such as the Hospital Association of Ohio; the gift of the Rockefeller Foundation, under certain conditions, of money for the library; the establishing of Association Headquarters with Dr. A. R. Warner as full time executive secretary. He named many things requiring attention, such as the need of an expert purchasing agent at headquarters to help the hospitals. He spoke of the shortage of nurses and quoted Miss Nutting as foretelling this years ago. He referred to the Rockefeller Survey in connection with the training of hospital executives. Dr. Warner, in his report, brought something of immense value to every association. To quote him: "membership must be worth more than it costs * * * there is need for more than meetings, papers, etc." He outlined the work of the library, enumerating some of the things to be accomplished,—surveys for institutions at cost; for members, at ten per cent; and for non-members at cost. The library would furnish facts and figures, as to costs, etc., free. He said, that the members must not only get, but must give to the library; that this was an effort to assemble and not to create new things. The library would try to get fixed definitions and standards for hospitals, such as "days of treatment," etc., so that there could be a common language. As these papers will probably be published in the *Modern Hospital*, it is useless to quote, but one which created most discussion, at least in the halls and corridors, was that by Dr. Parnall of Ann Arbor on Selection and Organization of Hospital Personnel. Dr. Parnall disapproved of women as hospital superintendents and, as the majority of the hospital superintendents are women, this did not seem to please. The number of non-medical superintendents, of whom he also disapproved, was too small to give an impression of how his paper was received by them. The rest of Dr. Parnall's paper seemed to be found most valuable.

The session devoted to the subject, How to Raise Money with a paper, by Mr. Clark, was full of good advice, and the discussion brought out much which will help in the future. The sessions on hospital social service were very well attended. It was regretted that the lack of time made it impossible to give more attention to the matter. The question box occupied one entire afternoon and evening. Among the features of this meeting, of particular interest to our readers was the Wednesday evening session presided over by Elsie Lawler of Johns Hopkins School for Nurses, at which excellent papers on various subjects directly connected with the training of the nurse were presented by Jean I. Gunn of Toronto, Annie W. Goodrich of New York, Claribel Wheeler of Cleveland, and Carrie M. Hall of Boston. The Hospital Conference met on Thursday morning. The reports of trustees, treasurer, committee on hospital library and service bureau were read. Dr. Billings gave a most helpful and interesting address suggesting the principles and policies for the next year. There was a little discussion. Friday morning, at the general session with the American

Hospital Association, Dr. Billings gave a report on the service which the Conference can now render to the hospital personnel through the hospital library and service bureau. A report was given by Dr. Dodson on the work of the Medical Association, which was represented. Miss Wheeler gave a summary of the report on the survey of the Committee on Nursing. The principles and policies outlined by Dr. Billings were adopted, and the trustees were authorized to formulate methods of procedure for surveys, etc. Most interesting reports of the year's work were given by Col. Glennan of the Army and Col. Bell of the Navy. It was interesting to hear from the former that the Army nurses had received relative rank—without request from them! Annie W. Goodrich represented the National Organization of Public Health Nursing; Carrie Hall and Adda Eldredge, National League of Nursing Education; Claribel A. Wheeler, nursing committee of the American Hospital Conference; Elsie M. Lawler and M. Helena McMillan, American Nurses' Association; Jean I. Gunn and Elizabeth Flaws, Canadian Association.

THE UNITED STATES PUBLIC HEALTH SERVICE will conduct an institute on venereal disease control and social hygiene at Washington, D. C., November 22 to December 4. The aim of the Institute will be to provide instruction for those who desire further knowledge to aid them in their work, by men and women who are recognized as the highest authorities on the various scientific and professional phases of the problem. Applications will not be accepted after November 15. No tuition fee is charged.

THE SPANISH-AMERICAN WAR NURSES held their twentieth annual meeting in Cincinnati, September 28, 29 and 30. Meetings were held mornings and evenings and the afternoons were given over to sight seeing and social entertainments, which included an automobile ride, giving view of places of interest in Cincinnati and vicinity, a visit to the Cincinnati General Hospital where the nurses were entertained with a tea on the roof garden of the nurses' home, an automobile ride through the Highlands of Kentucky, and a visit to Fort Thomas.

THE AMERICAN DIETETIC ASSOCIATION held its third annual meeting October 25-27, at the Hotel McAlpin, New York. There were many interesting papers. Among those relating to hospital work were: Hospital Menu Making, Its Economic Aspect; Economical Buying for the Institution; Dietetic Treatment of Out-patients Suffering From Metabolic Diseases; Dietetics in Public Institutions; Dietetics for Nurses; Methods of Teaching Dietetics to Nurses; Some Dietetic Problems of Infancy and Childhood.

Arizona: Phoenix.—THE NEW DEACONESS HOSPITAL has been opened with a capacity of 120 beds. Hazel Rungan, formerly superintendent of Flower Hospital, Toledo, has been appointed superintendent.

California: San Francisco.—STANFORD UNIVERSITY has begun construction of a \$425,000 school for nurses in connection with its medical school and hospitals. The building will provide living accommodations, classroom and laboratory equipment for more than two hundred students and will be the best equipped building for its purpose in the country. The University offers a pre-nursing course, of three years, at Palo Alto, and two years in the school of nursing and in the Stanford University Hospital, and Lane Hospital. **Santa Ana.**—THE SANTA ANA HOSPITAL has been reorganized under the name of THE COMMUNITY HOSPITAL ASSOCIATION on an endowed basis. It is planned to secure a five acre site on which to build a new hospital. **Fresno.**—The graduate nurses of the Burnett

Sanitarium organized an Alumnae Association with about sixty charter members on September 15.

Canada.—THE FIRST CLASS in public health nursing to be graduated in Canada received their diplomas on September 21 at Delhousie University. Eunice H. Dyke, Director, Division of Public Health Nursing in the Department of Public Health, Toronto, addressed the class. The second course in public health nursing began October 26, 1920.

Colorado.—THE COLORADO STATE NURSES' ASSOCIATION held its semi-annual meeting in Greeley, September 23. The members feel that the first and great thing revision has done for the Association has been to increase the membership from two hundred to approximately five hundred members. With the addition in such numbers of this newer element, with their varied interests, will come the necessity for a different type of a State Association meeting. The newly organized PUBLIC HEALTH SECTION, with Olive Chapman, Chairman, convened the day previous to the meeting of the State Association. The morning session of the Public Health Section was given to business—the number of meetings during the year, place, etc. The Weld County Chapter Red Cross expressed their appreciation of public health nursing, or perhaps their appreciation of their own Red Cross public health nurse, by entertaining the section at luncheon at the Camfield Hotel. In the afternoon one of the local theaters ran two Red Cross films, so all attended the "movie." The remainder of the afternoon was given to round tables. By this time a number of people for the meeting the following day had begun to arrive, so that at the evening meeting the parlor of the hotel was well filled. Judge Baker of the Juvenile Court, Weld County, gave a most interesting talk. Miss Douglas, of the State Agricultural College, talked on the correlation of work of the home demonstrator and the public health nurse. Elizabeth Fox, of the National Organization, who was in the state at that time, gave a talk showing her keen appreciation of some of the present problems of nursing. By this time the meeting had outgrown the quarters at the hotel and it was announced that the sessions the following day would be held at the Court House. The magnificent new court house was thrown open, and literally the members "dwelt in marble halls." The opening session of the State Association was given to business. At eleven o'clock the meeting was turned over to the League of Nursing Education. Dr. Hillman, of the State Normal, gave a talk on Mental Tests. Dr. Meade, of Greeley, on behalf of the medical and nursing professions welcomed the Association to the city. Response was by Mrs. Oca Cushman, President. The Weld County Association of Nurses entertained at luncheon. It was a pleasant surprise to notice that covers were laid for fifty for luncheon, and it seems that "gone are the days" when it was necessary to wait for nine for a quorum. Miss Martha M. Russell, of Boulder, thoughtful as ever, had brought the Florence Nightingale Medal awarded her during the war and it was passed around the table that all might see. After luncheon the State Association and the Educational League held short business sessions. Everyone felt that the time had been too short, so plans are being discussed for a three-day session for the annual meeting, which will be held in Colorado Springs, beginning the second Thursday in February. This was the first time the Board of Directors had voted to go to a locality, notifying the nursing organization afterward of their intention of coming, but all who attended came away with such a pleasant remembrance of the city of Greeley, of the people, both professional and the laity, and of the courtesies they had extended us, that it was the chief topic of

conversation on the way home. One result of the meeting seems to be an increased desire to organize alumnae associations and thus become a part of the State Association. A meeting of the PUBLIC HEALTH SECTION OF THE COLORADO STATE GRADUATE NURSES' ASSOCIATION will be held in Pueblo the first week in November. THE COLORADO STATE BOARD OF NURSE EXAMINERS will examine applicants for state registration, December 14, 15 and 16, 1920, at the State Capitol. Applications should be sent to the secretary, Louise Perrin, State House, Denver, Colorado.

Delaware.—THE DELAWARE STATE BOARD OF EXAMINERS OF NURSES will hold their next examination for registration of nurses and will also pass on application by reciprocity on December 6, 9:30 a. m., at the Homeopathic Hospital, Wilmington. Applications should be mailed to the Secretary, Mary A. Moran, 1313 Clayton Street, Wilmington, Del., not later than December first. THE DELAWARE HOSPITAL ALUMNAE ASSOCIATION at its eleventh annual meeting elected for the coming year: President, Evelyn B. Hayes; vice-president, Mary Kane; treasurer, Mrs. Arthur C. Whittier; secretary, Anna W. Jones; assistant secretary, Lucile Ralph; directors, Clara Conley, Mrs. Burnet Smith, Elizabeth Rogers and Bertha Schranck.

District of Columbia.—THE NURSES' EXAMINING BOARD OF THE DISTRICT OF COLUMBIA will hold an examination for the registration of nurses on November 17. Applications should be sent to Margaret Flynn, Secretary-Treasurer, 1337 K. Street, Washington, D. C.

Florida.—THE FLORIDA STATE NURSES' ASSOCIATION will hold its annual meeting in Tampa, November 18 and 19.

Georgia.—THE GEORGIA STATE NURSES' ASSOCIATION will hold its annual meeting in Augusta, November 8-10. Frances M. Ott of Indiana will be one of the speakers.

Illinois.—THE ILLINOIS STATE ASSOCIATION OF GRADUATE NURSES held its seventeenth annual meeting in LaSalle, September 30, through October 1, with headquarters at the Kaskaskia Hotel. The eleven districts of the state were all represented, the registration being over 200. The first morning session was occupied with the address of welcome, Rev. E. M. Weiss, director of the Hygiene Institute; response, Mary C. Wheeler; president's address, M. Helena McMillan; reports and business. The afternoon session was taken by the League of Nursing Education with the following programme: address of welcome, Hon. P. E. Coleman, mayor of LaSalle; president's address, Bena M. Henderson; reports of officers and committees. The following were elected as League officers: President, Elsie L. Burke, Children's Memorial Hospital, Chicago; vice-president, Mrs. Jessie R. McDonald, St. Luke's Hospital, Chicago; secretary, Mary H. Cutler, Presbyterian Hospital, Chicago; treasurer, Ada B. McCleery, Evanston Hospital, Evanston. The following motion pictures were shown and proved very interesting: "In Florence Nightingale's Footsteps," "Every Woman's Problem—Home Care of the Sick," "An Equal Chance." At the evening session, there were round tables: Alumnae By-Laws, conducted by Mary C. Wheeler, Chicago; American Legion, Eula Butzerin, Chicago; Infant Welfare, Clytha De Costa, Chicago; Industrial, Sadie B. Walsh, Depue; Instructors' League, Mary Cutler, Chicago; Private Duty, Maybelle Parrott, Springfield; Public Health, Stella Fuller, Chicago; Red Cross, Mary McKay, Chicago; The Small Hospital, Elizabeth Asseltine, Waukegan; Social Service, Ella Allen, Chicago; School Nursing, Anne Ambridge, Hinsdale; Tuberculosis, Lenore Tobin, Chicago;

Training School Superintendent and Questionnaire, Elsie Burks, Chicago. At the morning session, October 1st, there were addresses by Alma Foerester, Chicago, one of the six nurses of this country to receive the Florence Nightingale Medal; by Mrs. C. C. Sloane, Moline, "The Importance of the Woman's Vote"; Dr. Eva Wilson, Manhattan, Ill., Chairman of Public Health in the State Federation of Woman's Clubs; Mr. F. C. Dodds, Director of Department of Registration and Education, Springfield. The following officers were elected for the State Association for the ensuing year: President, Ada Belle McCleery, Evanston; vice-presidents, Margaret Wilson and Margaret Johnston; secretary, Nellie M. Crissy, Hahnemann Hospital, Chicago; treasurer, Elizabeth A. Asseltine. HARRIET FULMER, supervisor of the Cook County public health nurses, has been appointed State supervising health nurse. Miss Fulmer is a graduate of St. Luke's Hospital School for Nurses. Two Sisters of St. Joseph's Hospital attended the Catholic Hospital convention in St. Paul. Chicago.—Elizabeth Laibe, class of 1920, Presbyterian Hospital, has accepted a surgical position at the Hospital.

Indiana.—A CONFERENCE OF THE PUBLIC HEALTH NURSES OF INDIANA with the State Board of Health was held at the Hotel Severin, Indianapolis, October 5 and 6. Each of the one hundred nurses present felt that it had been a real success, first, because it met the needs of the pioneer nurses and second, because the nurses wanted the conference. Many brought members of their nursing committees with them. All came with the idea of getting and giving. The programme included the following addresses: State Institutions, by Amos W. Butler, Secretary State Board of Charities and Corrections; Educational Program and Its Relation to Public Health, by L. N. Hines, State Superintendent of Public Instruction; Metropolitan Nursing, by Mrs. Helen LeMalle, District Supervisor, Metropolitan Life Insurance Company, New York City; The Nurse in the Tuberculosis Clinic, by Marian Bell, Chief Nurse, Indianapolis Free Tuberculosis Clinic; Infant Welfare, by Dr. James C. Carter, Division of Child Hygiene, Indiana State Board of Health; Baby Clinic in Rest Room of County Court House, by Bertha Lips, Red Cross Public Health Nurse for Washington County; "Lizzie Ford" and Her Troubles, by William H. Howe; Elementary Hygiene and Home Care of the Sick with Demonstration, by June Gray, Indianapolis Red Cross Teaching Center; Examination of Eyes of School Children, by Dr. W. F. Hughes; The Need for Early Care of the Teeth, by Dr. F. R. Henshaw, Dean, Indiana Dental College; address by Cecilia Evans of Cleveland; Coöperation of Public Health Nurse and Local Agencies, by Anna Anderson, Red Cross Public Health Nurse, Benton County; Problems of a County Public Health Nurse, by Velma Carpenter, Red Cross Public Health Nurse, Newton County; Developing County Public Health Nursing Service, by Elizabeth Melville, Red Cross Public Health Nurse, Washington County; A Short Story, Helen Teal. There were also many round tables. THE INDIANA STATE NURSES' ASSOCIATION held its annual meeting in Indianapolis on October 7, 8, and 9. One of the speakers was Sara E. Parsons, recently superintendent of nurses, Massachusetts General Hospital, who spoke on Training School Readjustment and the Place of the Alumnae in Readjustment. Miss Parsons is now making a survey of nursing conditions in Missouri and Oklahoma. The Indiana nurses felt very fortunate in being able to hear her. Other speakers were Dr. Daisy Robinson of the United States Public Health Service and Dr. J. N. Hurtz, Secretary, Indiana State Board of Health, who spoke on Venereal Diseases. Mrs. Ethel P. Clark presented the proposed bill for the raising of the standards of training schools, which is to be introduced into the 1921 legislature. Interesting papers were read on School Nursing, Visiting

Public Health Nursing, Private Duty Nursing and Industrial Nursing. Frances M. Ott, State Chairman of the Nurses' Relief Fund, reported that \$601.00 had been subscribed by the various alumnae associations. The largest subscription was \$100 from the Fletcher Sanatorium Alumnae of Indianapolis. A Private Duty Section was organized, Grace M. Cook, Indianapolis, being elected chairman. The following officers were elected: President, Mary A. Meyers, Indianapolis; vice-presidents, Gertrude Barber and Louise Hiatt; secretary, Mrs. C. D. Fansler, R. R. O., Box 55, Indianapolis; treasurer, Allean Gress, Ft. Wayne; directors, Louise Nichol, Frances Ott, Della Glen, Edith Willis, Mary Favorite and Grace Morehouse. This was the largest nurses' meeting ever held in Indiana. More than 200 nurses registered and including visitors it was estimated that about 300 attended the meeting. Twenty-seven subscriptions for the JOURNAL were taken and over \$600 contributed to the Relief Fund. Macie N. Knapp, graduate of the University of Michigan Training School for Nurses, has just returned to the United States after fifteen months in the service of the Near East Relief. Miss Knapp joined the Near East Relief a year ago last June. She was first stationed at Constantinople and assigned to the relief unit at Sivas, central Asia Minor, last November. Indianapolis.—Lizzie L. Goepfinger, a graduate of the Lakeside Hospital, Cleveland, has accepted a position as superintendent of nurses at the Protestant Deaconess Hospital. Miss Goepfinger spent several years in the Hartford Hospital, Hartford, Conn., as night supervisor and later as acting principal. She came to Indianapolis from Teachers College, where she attended the spring semester. Annette B. Cowles, a graduate of the Rochester General Hospital, Rochester, N. Y., recently accepted the position of superintendent of nurses at the Indianapolis City Hospital to succeed Mae Kennedy, who resigned to take up work in Illinois. Anna E. Rein, a graduate of the Indianapolis City Hospital, formerly supervisor, Public Health Nursing Service, Gulf Division, American Red Cross, left recently for Shelbyville, Ill., where she will make a survey for the Tuberculosis Association. Ft. Wayne.—Pearl Looker, class of 1919, Presbyterian Hospital, Chicago, is superintendent of nurses, Hope Methodist Hospital.

Iowa.—THE IOWA STATE NURSES' ASSOCIATION will meet in Creston on December 1, 2, and 3. A very interesting meeting is anticipated. Round tables will be conducted. The non-commercial exhibit is in charge of Frances Mathews of Iowa City. Several special features are being arranged. The Iowa nurses cannot afford to miss this convention. Elba Morse is chairman of the program committee. Des Moines.—THE BOARD OF DIRECTORS OF THE IOWA STATE ASSOCIATION met September 30 to consider plans for the coming convention. The annual State Conference of Social Workers was held October 17-19. A five years' health program for the state was outlined. The Lutheran Hospital Alumnae were hostesses to the district association at a Hallowe'en party at the Y. W. C. A. Beatrice Short, graduate of the New York City Training School for Nurses, who recently completed a course in public health at Teachers College, has assumed her duties as supervisor of school nurses. Esther Buncle has accepted the position of resident nurse at Simpson College. Anna Efla, graduate of St. Joseph's Hospital, St. Paul, has accepted a position as floor supervisor at the Samaritan Hospital. Council Bluffs.—DISTRICT NO. 9 OF THE IOWA STATE NURSES' ASSOCIATION has appointed three delegates to the state convention. Sally Hart has accepted an institutional position in Hobart, Okla. Anna Winger has resigned her position as surgical and X-ray nurse at the Jennie Edmundson Memorial Hospital to do private nursing. Olga Beyer has accepted a position

as X-ray nurse at Garfield Memorial Hospital, Washington, D. C. Ethel Martin is record nurse at Jennie Edmundson Memorial Hospital. **Mason City.**—DISTRICT NO. 10 OF THE IOWA STATE NURSES' ASSOCIATION held a meeting September 25. Dr. Thotmorton gave an interesting talk. Minnie Brakel of Cedar Rapids is public health nurse. Sophia Story has returned to her hospital duties at the Story Hospital. **Fairfield.**—DISTRICT No. 2 of the Iowa State Nurses' Association held a meeting September 25. About forty nurses attended. After the business session Elizabeth Finley presented a paper on Nursing Problems of the Small Hospital. Mable Lusk gave an account of the Nurses' Council of Iowa at Lake Okaboji. Anna Drake of the Iowa Tuberculosis Association reported the Mississippi Valley Conference held in Duluth, Minn. **Ottumwa.**—A FREE DIAGNOSTIC CLINIC has been established at the Ottumwa Hospital. The hospital, the Red Cross Chapter and the local doctors cooperate. **Wapello.**—ESTHER ALBRIGHT, who has completed a course in public health nursing at Cleveland, is county nurse for Louisa County. **Iowa City.**—THE COURSE IN PUBLIC HEALTH NURSING opened September 23. Helena Stewart of New York is director of the school. **Oskaloosa.**—THE MAHASKA COUNTY NURSES had an exhibit at their county fair. **Centerville.**—MARION WEBB has been appointed county nurse. **Fort Madison.**—MARGARET SPELMAN of Ottumwa is visiting nurse. **Bloomfield.**—BEULAH BENNETT has been appointed by the Red Cross as county nurse. **Cedar Rapids.**—DISTRICT No. 5 met in the parlors of Mercy Hospital September 30. After the routine business was finished the sisters furnished an excellent program and served a bountiful lunch.

Kansas.—THE KANSAS STATE BOARD FOR EXAMINATION AND REGISTRATION OF NURSES will hold an examination for state registration in Wichita, December 1 and 2. Nurses expecting to take this examination should file their applications at least ten days before the examination with the secretary of the board, Sister Mary Helena, Salina. **Topeka.**—DISTRICT No. 1 of the Kansas State Nurses' Association held its second annual meeting September 14, nine counties being represented. The following officers were elected: President, Mrs. Charles C. Bailey; vice presidents, Florence Bair and Edith White; secretary, Esther Sullivan, 729 Buchanan Street, Topeka; treasurer, Mrs. Damaris A. Payton. Anna St. Bonnett, Margaret Mitchener and Anna Henry were elected members of the Board of Directors. Following the business session at the Chamber of Commerce a basket dinner was held at Garfield Park.

Kentucky.—THE KENTUCKY STATE BOARD OF NURSE EXAMINERS will conduct a semi-annual examination at the J. N. Norton Memorial Infirmary, Louisville, November 16 and 17, beginning at 10 a. m. Applications and further information may be received from the secretary, Flora E. Keen, 115 North Main Street, Somerset.

Massachusetts: Boston.—THE COLLEGE OF BUSINESS ADMINISTRATION OF BOSTON UNIVERSITY offers a course in Industrial Service for nurses under the direction of Mrs. William E. McNamara beginning November 1 and continuing for a period of sixteen weeks with sessions each week on Monday and Wednesday evenings. There will be lectures by the director, members of the economic department of the college, representatives of various state departments, and the service directors and factory physicians of some of the largest industrial organizations of New England. Each attendant is expected to devote a minimum of two weeks to field work. Nurses will be aided in obtaining positions on completion of the course. Gertrude Garvin, class of 1903, Boston City Hospital Training School for Nurses, has received the appointment of superintendent of the

Isolation Hospital, Ottawa, Canada. Miss Garvin was formerly superintendent of the Boston Psychopathic Hospital. She resigned for service overseas. Gladys A. Dorrie, class of 1914, Women's and Children's Hospital, who has been office nurse for Dr. Charles A. Dennett, will sail for South India October 21. Miss Dorrie expects to serve as missionary nurse at Nellore. She is succeeded by Edna Mellish. Many of the books of the late Dr. Laura A. C. Hughes have been sent to the Medical Library and a large number of them, together with her bound JOURNALS, have been given to the Boston Nurses' Club. Her filing case, which she had purchased in preparation for a busy winter's work, was given to the Red Cross.

Michigan: Flint.—HURLEY HOSPITAL TRAINING SCHOOL FOR NURSES held graduating exercises for eight pupils on September 28, at St. Paul's Parish House. Dr. Victor C. Vaughn addressed the class. Following the address the class took the Florence Nightingale pledge.

Minnesota: Pokegama.—THERESA ERICKSON has charge of the commissary department of Pokegama Sanatorium.

Missouri.—THE MISSOURI STATE BOARD FOR THE EXAMINATION AND REGISTRATION OF NURSES will hold the next examination in St. Louis at the Planters Hotel, November 23 and 24, and in Kansas City at Junior College, November 26 and 27. Applications should be filed with the secretary, Mary E. S. Morrow, 417 East Main Street, Jefferson City. **St. Joseph.**—NOYES HOSPITAL ALUMNAE ASSOCIATION at a recent meeting elected the following officers for the ensuing year: President, Mrs. M. Boswell; secretary, Evangeline O. Gibbons; treasurer, Pauline Hughes. The Association at its recent meeting passed resolutions expressing regret at the resignation of Florence Burt as Superintendent of Noyes Hospital, and the appreciation of its members for her ever ready sympathetic encouragement and leadership. **St. Louis.**—THE PUBLIC HEALTH NURSES' ASSOCIATION held a banquet on October 12. Sarah E. Parsons and Major Julia Stimson were guests of honor. Miss Parsons expects to be in St. Louis for the greater part of October devoting her time to a survey of the training schools. Grace Lieurance, graduate of St. Luke's Hospital, is attending the Preparatory School at Columbia, Mo., and will accept the position as superintendent of nurses at St. Luke's Hospital the early part of next year. The Lutheran Hospital Training School graduated twelve pupils October 14. The graduation exercises were held at the Holy Cross School.

Nebraska.—THE NEBRASKA STATE BOARD OF NURSE EXAMINERS will hold its next regular examination in Omaha and Lincoln, November 22 and 23. For information and applications address H. H. Antles, Secretary, Department Public Welfare. **Omaha.**—DISTRICT NO. 2, NEBRASKA STATE NURSES' ASSOCIATION, held a meeting September 14. Talks were given by Dr. D. T. Quigley on Radium and by Mrs. H. T. Sumney on the proposed amendments to the constitution of the State of Nebraska. The nurses were asked to be prepared to pledge a day's salary to the Relief Fund at the annual meeting. The Lord Lister Hospital Alumnae Association resumed its meetings on September 13 at the Nurses' Central Club. Hulda Anderson, a former superintendent of nurses at the Swedish Mission Hospital, has returned to the hospital, in the same capacity. Mrs. L. A. Chambers has taken up her duties as instructor at the Ford Hospital. Omaha nurses and their friends are invited to contribute any attractive and salable articles for the bazaar which will be held in December for the benefit of the Nurses' Central Club and Registry. The South Side Hospital has been

reopened with Sadie Larsen in charge. There will be no training school. Luella Larsen is again teaching Home Nursing under the Red Cross.

New Jersey.—THE NEW JERSEY STATE NURSES' ASSOCIATION will hold its semi-annual meeting at the Y. M. C. A., Camden, on Wednesday morning, November 3. In the afternoon, there will be sessions of the League and of the Public Health nurses.

New York.—THE BOARD OF NURSE EXAMINERS desires to bring to the attention of all nurses that according to the amendment to the Nurse Practice Act which became law on May 12, 1920, all persons practicing in the State as trained, certified or registered nurses must be registered and licensed to so practice by the Regents of the University of the State of New York. Other persons using these titles will be in violation of the law. A clause in the act provides for this registration and licensing of nurses under a waiver of examination and other conditions heretofore required. *This waiver expires January 1, 1921.* Nurses already registered in the State are required to register with the Secretary of the Board of Nurse Examiners prior to *December 1, 1920.* Nurses who are *not registered in the State* at present should, in making application for registration, give the name and location of the school of nursing by which they were graduated. Provision is also made for non-graduates of long experience under this act and for those who are qualified to act as trained attendants. All nurses are urged to attend to this matter at once. Inquiries and applications should be addressed to the Secretary, Board of Nurse Examiners, State Department of Education, Albany, N. Y. Elizabeth C. Burgess, Secretary of the Board of Nurse Examiners, will have office hours every Saturday from 9 to 12 a. m., and 2 to 5 p. m., at 132 East 45th Street, New York. **Brooklyn.**—THE NURSES' ASSOCIATION OF THE COUNTIES OF LONG ISLAND, DISTRICT No. 14, held a regular meeting, September 28, at the Nassau Hospital. It was voted to contribute ten dollars toward the Memorial Fund. Ten dollars was also subscribed to the Relief Fund. **New York City.**—JUANITA WOODS has just completed a one-year course in Public Health Nursing at Columbia University and Henry Street Settlement and has accepted the position of assistant to the Director of Public Health Nursing in the State of Mississippi. Her headquarters will be at Jackson. Pauline Jordan, class of 1914, New York Hospital, sailed on September 18 under the Near East Relief Commission. She expects to do public health and relief work among the Armenians. Florence Swift Wright has completed the organization of the Supervision of Midwives throughout the State of New Jersey and has severed her connection with the New Jersey State Department of Health. After a vacation she took up for a limited time some special work with the New Haven Visiting Nurse Association. Miss Wright is now chairman of the Industrial Nursing Section of the National Organization for Public Health Nursing. Helena R. Stewart has been appointed to the Chair of Public Health Nursing of the University of the State of Iowa. Gladys Adams, class of 1910, has begun her work as assistant supervisor at Henry Street Settlement. Mildred Gibson and Edith Weaver have gone to St. Luke's Hospital, in Tokyo, Japan, where Miss Doane has returned to duty after her absence on furlough. Helen Howes is District Supervisor of Midwives of the New Jersey State Department of Health, North Hudson County District. On October 21, Ethel Robinson, Mabel Tom, Mrs. Grace Rogers, Helen Holland, Mary Grayson and Dorothy Jacobus sailed from Vancouver, for Peking, China, where they will be staff nurses in the Peking Union Medical College Hospital for a term of three years. The hospital is under the management of the Rockefeller Foundation. Gertrude Selzer, class of 1917, St. Luke's Hospital, has

been appointed assistant superintendent of nurses in the University of Virginia Hospital. Miss Piper, class of 1919, sailed, October 21, for China to engage in hospital work. Eveline Clarke, class of 1911, has taken the position formerly held by Augusta Meyers at the Cathedral School in Washington, D. C. Emeline Bent, class of 1916, is superintendent of the New Rochelle Hospital, New Rochelle. Martha Hardin, class of 1916, is in charge of Bell Memorial Hospital, Rosedale, Kansas. Mrs. M. D. Burke, class of 1907, has accepted the position of superintendent of Westmoreland Hospital, Greensburg, Pa. M. L. B. Tingle, class of 1901, has been appointed registrar for St. Luke's Alumnae Association. The New York County Nurses' Association held a meeting at the Central Club for Nurses on June 1. Miss Ward read a memorial to Miss Palmer which had been written by Mrs. Twiss. It was voted to send the memorial to the family of Miss Palmer and to the JOURNAL. St. Luke's *Alumnae Bulletin* in an editorial in the October number also pays a tribute to the memory of Miss Palmer. **Rochester.**—THE GENESEE VALLEY NURSES' ASSOCIATION held a meeting on the evening of September 27 at which talks were given on The Shelter by Miss Budd, and on Industrial Nursing by Sophie Paulus. St. Mary's Alumnae were hostesses. **Buffalo.**—WESTERN NEW YORK DISTRICT ASSOCIATION, No. 1, held a meeting September 15 in the auditorium of the Buffalo City Hospital. Delegates and alternates were nominated for annual meeting of the State Association. Dr. Walter S. Goodale spoke briefly on the Curriculum and Methods Employed in the City Hospital Training School for Nurses. Refreshments were served. **Saranac Lake.**—SARANAC LAKE GRADUATE NURSES' ASSOCIATION, DISTRICT No. 8, held a meeting October 5. It was decided to have donation day for the General Hospital and Free Bed Fund on October 26, and committees were appointed. Florence Struthers was appointed to give a talk to the graduating class of the high school, urging the students to enter training schools. **White Plains.**—Helen Plummer has received appointment to the supervisorship of occupation and recreation in the Burke Foundation. Mrs. Pauline Kirschenbaum has been appointed dietitian. **Utica.**—DISTRICT No. 7 OF THE NEW YORK STATE NURSES' ASSOCIATION held its annual meeting at the nurses' home of the Homeopathic Hospital, September 9. The following officers were elected: President, Julia Hardy; vice-presidents, Jane Brackenbush and Stella Jenkins; secretary, Ellen Buell; treasurer, Lena Clark. The outgoing officers were given a hearty vote of thanks.

North Carolina.—THE BOARD OF EXAMINERS OF TRAINED NURSES will hold an examination at the Yarrowborough Hotel, Raleigh, December 15, 16 and 17. All applications should be sent to the secretary, Effie E. Cain, 1206, Fulton Street, Salisbury, by the first of December.

North Dakota.—THE NORTH DAKOTA SCHOOLS that have adopted the eight-hour law for student nurses are very much pleased with the results.

Ohio.—THE NURSES' EXAMINING COMMITTEE OF THE OHIO STATE MEDICAL BOARD will hold an examination for nurse registration December 14, 15 and 16, at Memorial Hall, Columbus. Applications must be filed at the State House by December first, with H. M. Platter, M.D., Secretary.

Oklahoma: Oklahoma City.—MRS. ALICE BOWEN, formerly supervisor at the Presbyterian Hospital, Chicago, has accepted the position of superintendent of nurses, St. Anthony's Hospital.

Pennsylvania.—THE GRADUATE NURSES' ASSOCIATION OF PENNSYLVANIA will hold its eighteenth annual meeting in St. Paul's Parish House, Erie, November

9-12. The Private Duty Nurses' Section will hold an open meeting on Tuesday afternoon, and a business meeting on Wednesday morning. The League of Nursing Education will hold three sessions on Wednesday. Thursday evening will be devoted to an open meeting of the American Red Cross Department of Nursing. Philadelphia.—THE ALUMNAE ASSOCIATION OF THE SAMARITAN HOSPITAL held its annual meeting, September 28. Thirty-five members were present. The following officers were elected: President, Mrs. D. J. Donnelly; vice-president, Mrs. Lawrence Munder; secretary, Jessie M. Rowe; assistant secretary, Katherine Botthof; treasurer, Martha H. Wannemacher. Committees for the coming year were appointed. Delegates were elected to attend the state meeting in Erie. Plans for the annual bazaar were discussed. It is desired to clear off the endowment fund which is to be used to endow a room for the use of sick nurses of the alumnae. Fifteen new names were presented. Several new members were secured for the Beneficial Society. Blanche Kline, class of 1915, writes a very newsy and interesting letter telling of her trials and experiences as Directress of a Training School at Vikarabad, Deccan, India. Miss Kline will sail for home on a furlough as soon as a nurse can be found to relieve her. She makes a strong plea for nurses for India. In South India three hospitals are closed because there are no nurses; in a population of three hundred and fifteen million there are only sixty-one Nurse Superintendents; surely a needy place is this jungle. Anna Lafferty, class of 1909, who has been doing refugee work under the Red Cross in Poland, has returned to resume her duties in this country.

Utah.—CHARLOTTE DANCY, former superintendent of nurses at the Latter Day Saints' Hospital, Salt Lake City, has accepted a position with the Utah Agricultural College. Miss Dancy will devote part of her time to instruction work at Logan, working in connection with the public health department at the college, and part of her time in extension work over the State, conducting demonstrations and giving lectures. Miss Dancy is a graduate of Johns Hopkins Hospital.

Vermont: St. Albans.—ST. ALBANS ALUMNAE ASSOCIATION held its annual meeting October 12. The following officers were elected for the ensuing year: President, Laura A. Rooney; vice-president, Mary A. Burns; secretary, Gladys C. Wood; treasurer, Mary F. Nevins; director for three years, Lillian Johnson. Gladys Wood was appointed delegate from the association to attend the State Association meeting.

Washington.—BARBARA H. BARTLETT, who was formerly in charge of the Department of Nursing, University of Washington, Seattle, has accepted a position at the University of Michigan, Ann Arbor. Seattle.—LOUISE TODD, class of 1913, Presbyterian Hospital, Chicago, is night supervisor, Minor Hospital. Ella Van Doren, class of 1917, Presbyterian Hospital, Chicago, is in charge of the maternity department.

West Virginia.—THE WEST VIRGINIA STATE NURSES' ASSOCIATION held its annual meeting in Elkins, September 1-3. The following officers were elected: President, Susan Cook; vice-presidents, Harriet Linn and Alice Payton; secretary-treasurer, Mrs. R. J. Bullard, Wheeling; directors (three years), Mrs. Lounsbury, Emma Vernon, Angela Jepson; (two years), Elizabeth Oliver, Margaret Leatham, Laura Hawley; (one year), Sister Stanislaus, Mrs. Maud Bratner, Ann Dunlap; president Superintendents' Society, Agnes V. Lynch; president, Public Health Section, Maud Sutton. At the close of the first session, the members were entertained with a delightful tea at the home of Mrs. Arthur

Lee, Secretary of the Board of Trustees of the Davis Memorial Hospital; later came a walk through the grounds of the home of the late Hon. H. G. Davis, and a visit to the hospital which he founded. The evening session was called to order by Mrs. H. C. Lounsbury, of Charleston, honorary president. The first address of the evening was that of Dr. W. W. Golden, Superintendent of Davis Memorial Hospital, Elkins, who chose for his topic, "The Nurse as a Citizen." This subject was well and ably handled and was followed by a report of the Secretary of the West Virginia State Board of Examiners, Anna M. Trimble, Huntington. After a report of District No. 2, sent by its Secretary, Mary E. Ried, of Charleston, and a report of District No. 1, given by Mrs. R. J. Bullard, of Wheeling, a motion was made that greetings be sent Mrs. Cook; following which, the meeting adjourned. On Thursday morning, through the courtesy of the Alumnae of the Davis Memorial Hospital, a delightful auto ride through the Tygart Valley was enjoyed. Later, the meeting was called to order and an address, "Some Things a Nurse Ought to Know About Dietetics," by Dr. S. G. Moore of Elkins, was given. This was a very helpful and instructive paper. After a delightful luncheon tendered by the staff of the City Hospital, the afternoon session was called to order. A paper, "Which Do You Prefer, a Two or a Three Year Course?" was read by Harriet Linn, Superintendent of Nurses, Davis Memorial Hospital, Elkins. This paper brought out many problems for thought. Next, "How Can Training Schools Make Hospital Life More Attractive to Nurses?" by Jessie Clark, Principal of Nurses, Ohio Valley General Hospital, Wheeling. This subject also brought out many good points. By-laws and Constitution of the West Virginia State Association were read by Mrs. R. J. Bullard and approved as read. These By-laws conform with those of the American Nurses' Association. Mrs. H. B. Owens, of Elkins, gave a short talk in regard to the trained and the untrained nurse. The Public Health Session was opened by an address by Mrs. H. C. Lounsbury, Chairman Public Health Section. Following an address on State Public Health Organization, by Mrs. Jean T. Dillon, Director, Division of Child Hygiene and Public Health Nursing, Charleston, a paper, "The Extended Sphere of the Trained Nurse and How Best Maintained," was read by Dr. J. C. Irons of Dartmoor. Mrs. Ben Hoover, of Elkins, addressed the convention on the movement in the state to make provision for the mentally defective. The Public Health Session was continued in the evening and after reading a letter from the Red Cross regarding Opportunities for Service in the Navy Nurse Corps, a paper, "Industrial Absentee Calls," written by Lyda Durlridge, of Morgantown, was read by Mrs. Lounsbury. "Public Health and Community Nursing," was the subject of a well written paper by Irene M. Thompson, Superintendent, City Hospital, Elkins. Miss Thompson, who served with the A. E. F. in France, also gave a short talk on the death of Jane A. Delano. Another interesting paper, "The School Nurse and Her Duties," written by Mary L. Barry, Wheeling, was read by Mrs. Lounsbury. Following this, Mrs. Lounsbury gave an interesting talk on the remarkable system of school dental clinics in McDowell County. Mrs. Bullard read a letter of greeting from Miss Reid, which closed the program for the evening. Friday morning was given over to the Private Duty Section. Paper, "Some Problems of Private Duty Nursing," by Helen Eggleston, Charleston, brought about much discussion. Report of Private Duty Section of District No. 2, by Jennie Lloyd, Secretary, led to a discussion regarding fees. The next meeting will be held in Parkersburg.

Wisconsin.—THE WISCONSIN COMMITTEE OF EXAMINERS OF REGISTERED NURSES will hold an examination January 11 and 12 at Madison. Applications

must be filed with the secretary, Myra W. Kimball, Health Department, LaCrosse, at least fifteen days prior to date of examination. THE WISCONSIN STATE NURSES' ASSOCIATION held its eleventh annual meeting October 5, 6 and 7, at Wausau. The following officers were elected: President, Mrs. E. Wolf, LaCrosse; secretary, Lavinia Dietrickson, 566 VanBuren Street, Milwaukee; treasurer, Mary Pakenham, Milwaukee. Mary E. Casey is chairman of the Relief Fund Committee. Mayor Emil Flatter gave the address of welcome. Mrs. E. Wolf responded for the Wisconsin State Nurses' Association and Mrs. A. Northam for Wisconsin League of Nursing Education. Roll call and a business meeting followed. Dr. Dodd, President of State Medical Board, gave a paper on The Relation of the State Board of Medical Examiners to the Graduate Nurse. This was followed by a tour of the city in automobiles and dinner at Mount View Sanatorium. Miss Kalbfleisch, Superintendent of Bureau of Home Nursing, Milwaukee Society for the Care of the Sick, gave a paper on Training of Attendants. A round table was conducted for training school superintendents. Shirley C. Titus, superintendent of nurses, Columbia Hospital, gave a paper on The Status of the Dietitian in the Training School. Stella Fuller gave a paper on Public Health Course in Training Schools. Wednesday evening was given over to a banquet at Rothschild's Park which was followed by dancing. The papers Thursday morning were: The Nurse in Industry, by Neta Edwards, special advisor, National Safety Commission, Chicago; and The Progress of Public Health Nursing in Wisconsin, by Nelly van Kooy, supervising nurse with State Board of Health. Round tables were conducted on Public Health Nursing, Industrial Nursing, and Private Duty Nursing. Gertrude McGuine gave an informal talk on Battlefields of France and Belgium. A social at the Business and Professional Women's Club concluded the meeting. Mary E. Lent of the National Organization for Public Health Nursing was present and gave a fine address. The sum of fifty dollars was pledged to the Relief Fund. A Public Health Section was formed with these officers: President, Nelly van Kooy; secretary, Ella Lemmon. THE WISCONSIN STATE LEAGUE FOR NURSING EDUCATION held its fifth semi-annual meeting at Wausau, Wis., October 6. The attendance was the best in the history of the organization and a constructive program was outlined for the ensuing year. The acute shortage in applicants for schools of nursing was discussed and the following recommendations were made to the Legislative Committee: Whereas, the three year course for the training of nurses does not sufficiently prepare them for the specialized work, and Whereas, three years is too long a time for a general training; Be it resolved, that the three-year law be changed to read "Not less than two years." That during this two-year period the training of the nurse be placed on a strictly educational basis, and all services not essential to the education of nursing be eliminated. That the nurse receive during this time a training that will prepare her for general nursing in the care of the sick, thus leaving the choice, if so desired, of any special work to the nurse after the completion of the two-year course. That the preliminary educational requirements for the general training be one year high school or its equivalent. That after the year 1924 the degree R.N. be conferred only to such nurses as have completed four years of high school or its equivalent and successfully completed the prescribed course in a school for nurses. That any nurse having finished the two-year course and having had one year of high school or its equivalent may become eligible for the degree of R.N. after she has obtained through the medium of night school, summer school study or tutoring the number of credits equivalent to the four years of high school. If a young

woman does not aspire to the degree of R.N. after she has completed the two years of training she will be known as a graduate nurse. It is hoped by this means a higher value may be placed on the degree and that institutions employing nurses for executive and responsible positions will help maintain these standards by employing registered nurses only. A further constructive program for the training of attendants and the licensing of all those engaged in the care of the sick for hire was planned for the ensuing year. The following officers were elected for the year 1921: President, Mrs. Adelaide Northam, Milwaukee County Hospital, Wauwatosa, Wis.; vice-president, Anna Haswell; secretary, Marian Rottman, Johnston Emergency Hospital, Milwaukee, Wis.; treasurer, Delphine Hines. **LaCrosse.**—THE LACROSSE PUBLIC HOSPITAL held commencement exercises on September 14 for a class of seven. A dinner was given at Stephan's in honor of the alumnae and graduating class.

Wyoming.—THE WYOMING STATE BOARD OF NURSE EXAMINERS announce examinations for registration of graduate nurses to be held in Rock Springs, Sheridan and Cheyenne, on the 7th, 8th, and 9th of December. Applications should be filed with the secretary, Mrs. H. C. Olsen, Cheyenne, in advance of the examination.

BIRTHS

On August 27, a son, to Dr. and Mrs. Charles Greenhut. Mrs. Greenhut was Marion Treuman, class of 1913, Montefiore Hospital, Pittsburgh, Pa.

On July 4, a son, to Mr. and Mrs. Ballin. Mrs. Ballin was Francesca Mingden, class of 1918, St. Joseph's Hospital, Chicago.

On August 13, in Groton, Conn., a daughter, Kathleen Jane, to Mr. and Mrs. J. B. Longstaff. Mrs. Longstaff was Hilda K. Dempster, class of 1915, New England Hospital for Women and Children.

Recently, in Trenton, N. J., a son, to Mr. and Mrs. Fred Brindley. Mrs. Brindley was Anna M. Palmer, class of 1917, McKinley Memorial Hospital, Trenton, N. J.

Recently, in Scranton, Pa., a son, to Dr. and Mrs. Clair W. Handley. Mrs. Handley was Bessie Donohue, class of 1906, McKinley Memorial Hospital, Trenton, N. J.

Recently, in Mt. Holly, N. J., a daughter, to Mr. and Mrs. Logan Morris. Mrs. Morris was Olethea West, class of 1910, McKinley Memorial Hospital, Trenton, N. J.

On September 9, in Cannon Falls, Minn., twins, to Mr. and Mrs. Edmund Beckman. Mrs. Beckman was Emma Peterson, class of 1914, St. John's Hospital, Red Wing, Minn., and was the first school and tuberculosis nurse in Goodhue County.

On September 5, a son, to Mr. and Mrs. S. A. Recner. Mrs. Recner was a member of the class of 1918 of the Bismarck Hospital, Bismarck, N. D.

On August 26, a son, to Mr. and Mrs. Alexander MacRae, Jr. Mrs. MacRae was Lydia McLaughlin, class of 1918, St. Luke's Hospital, New York.

On June 10, a son, Charles Quinn, to Dr. and Mrs. Joseph E. McClelland. Mrs. McClelland was Joan Quinn, class of 1912, St. Luke's Hospital, New York.

On July 2, in Wilmington, Del., a son, John Barrie, to Mr. and Mrs. Richard Mackenzie. Mrs. MacKenzie was Ada Huggins, class of 1911, St. Luke's Hospital, New York.

On July 4, in Lexington, Ky., a son, to Mr. and Mrs. Harbison. Mrs. Harbison was Dorothea Mann, class of 1912, St. Luke's Hospital, New York.

Recently, a daughter, to Mr. and Mrs. William Woods. Mrs. Woods was Byna Gamel, class of 1918, St. Luke's Hospital, New York.

On July 3, in Manchester, N. H., a daughter, to Dr. and Mrs. Benjamin Burpee. Mrs. Burpee was Marguerite Burke, class of 1917, Boston City Hospital.

On September 7, in Boston, Mass., a son, to Mr. and Mrs. Harry Duncan Burgoyne. Mrs. Burgoyne was Elizabeth G. Reger, class of 1916, Boston City Hospital.

On July 21, in Dickinson, N. D., a son, Dean David Twedton, to Mr. and Mrs. Dean David Wiley. Mrs. Wiley was Hilda Twedton, class of 1911, Presbyterian Hospital, Chicago.

On September 5, in St. Paul, Minn., a daughter, to Dr. and Mrs. F. F. Callahan. Mrs. Callahan was F. Helen Clark, class of 1911, Jewish Hospital, Philadelphia. Dr. and Mrs. Callahan both served overseas and were married in France.

On September 28, in Philadelphia, a son, Harold Willard, to Mr. and Mrs. Benjamin Burnley. Mrs. Burnley was Leah D. Swartley, class of 1911, Samaritan Hospital, Philadelphia.

In July, a son, to Mr. and Mrs. Charles Dippold. Mrs. Dippold was Anna Calcaterra, class of 1918, Connecticut Training School for Nurses, New Haven, and class of 1919, School of Public Health Nursing, New Haven.

On August 3, a son, to Dr. and Mrs. Huge Hanrahan. Mrs. Hanrahan was Minnie Roddy, class of 1911, Rutland Hospital, Rutland, Vt.

On September 23, a daughter, Lucy Ann, to Mr. and Mrs. Richard Spaulding. Mrs. Spaulding was Louise Moore, class of 1911, Rutland Hospital, Rutland, Vt.

On March 18, a daughter, to Dr. and Mrs. M. Hamm, Madison, Ill. Mrs. Hamm was Mathilda Holterman, class of 1910, Lutheran Hospital, St. Louis.

On April 28, twin boys, to Mr. and Mrs. E. Rosebrock, St. Louis, Mo. Mrs. Rosebrock was Bertha Drews, class of 1916, Lutheran Hospital.

On September 12, a son, Mark Homer, Jr., to Mr. and Mrs. Mark H. Jackson. Mrs. Jackson was Mae Cole, class of 1914, Children's Hospital of Philadelphia.

On September 20, a son, to Mr. and Mrs. A. E. Johnson of Rockwell City, Iowa. Mrs. Johnson was Blanche Frink, class of 1909, St. Luke's Hospital, Cedar Rapids, Iowa.

MARRIAGES

On September 1, in Plainfield, Ill., Esther Keeley, class of 1918, Mercy Hospital, Chicago, to Charles Connor, M.D. Dr. and Mrs. Connor will live in Chicago. Mrs. Connor has been doing infant welfare work for the past year.

Recently, Bertha Almquist, class of 1918, St. John's Hospital School for Nurses, Red Wing, Minn., to R. B. Akerson. Mr. and Mrs. Akerson will live in Vasa, Minn.

Recently, Ella Gaustad, class of 1913, St. John's Hospital School for Nurses, Red Wing, Minn., to Erling W. Hanson, M.D. Dr. and Mrs. Hanson will live at Philps Island, Lake Minnetonka, Minn.

Recently, Mathilda Eidnio, class of 1918, St. John's Hospital, Red Wing, Minn., to Z. W. Behmler, M.D.

On September 6, in Aurora, Ontario, Zelma P. Davis, class of 1913, Erie County Hospital, Buffalo, N. Y., to Martin H. Schrader. Mr. and Mrs. Schrader will live in Wilson, N. Y. Mrs. Schrader served overseas with Base Hospital No. 19.

Recently, Lillian B. Dixon to Joseph Blackman. Mr. and Mrs. Blackman will live in Birmingham, Ala. Mrs. Blackman served overseas fourteen months.

Recently, in Lawton, Okla., Evelyn Whitehead, class of 1919, Southwestern Hospital Training School for Nurses, Lawton, to Joseph T. Anthony, M.D. Dr. and Mrs. Anthony will live in Lawton.

On September 5, in Lawton, Okla., Laura Hanson, class of 1919, Southwestern Hospital, Lawton, to Ray Bowman. Mr. and Mrs. Bowman will live in Lawton.

In September, in West Chester, Pa., Martha B. Pierce, class of 1905, Chester County Hospital, West Chester, to Alfred B. Roberts. Mr. and Mrs. Roberts will live in Cochranville, Pa.

On October 10, in Montour, Iowa, Mary Bryant, class of 1917, St. Luke's Hospital, Cedar Rapids, Iowa, to Clarence Rorer, D.D.S. Dr. and Mrs. Rorer will live in Waukeegan, Ill.

On July 31, in Los Angeles, Calif., Lydia Sinclair, graduate of the Methodist Hospital, Omaha, Neb., to Franklin M. Jones. Mrs. Jones served overseas and for the past year has been doing county Red Cross public health work in Shoshone, Idaho.

On September 15th, Fredricha Braun, graduate of Children's and Columbia Hospitals, Washington, D. C., to Leon L. Chevalley. Mr. and Mrs. Chevalley will live in Gulfport, Miss.

On September 18, Irene Ingraham Jones, class of 1917, St. Luke's Hospital, New York, to Francis Shippen MacIlvaine. Mr. and Mrs. MacIlvaine will live in East Orange, N. J.

On August 20th, in Smithtown, L. I., Charlotte Townsend, class of 1916, St. Luke's Hospital, New York, to Chester Karl Harriman.

On September 3, in New York, Astrid Johnson, class of 1917, St. Luke's Hospital, New York, to William Howard Smith. Mr. and Mrs. Smith will live in Brooklyn.

On August 17, in San Francisco, Calif., Marjorie Madeine Peterson, class of 1918, St. Luke's Hospital, New York, to Frank W. Wise.

On September 19, in New York, Dorothy Jean Boyd, class of 1918, St. Luke's Hospital, New York, to Joseph Lintz, M.D.

On July 7, in Charlotte, N. C., Arabelle Thomas, class of 1919, St. Luke's Hospital, New York, to Paul Hamilton Rogers, Jr. Mr. and Mrs. Rogers will live in Hartsville, S. C.

On July 31, in Toronto, Canada, Suzette Elizabeth Crombie, class of 1917, St. Luke's Hospital, New York, to William W. Kirk.

On July 1, in Kingston, Jamaica, B. W. I., Amy Helen Trench, to Ansell Hart. Miss Trench was formerly an instructor in St. Luke's Hospital, New York.

On July 31st, Augusta Meyer, class of 1903, St. Luke's Hospital, New York, to Walter Benedict. Mr. and Mrs. Benedict will live in Jacksonville, Fla. Mrs. Benedict was for a number of years resident nurse at the Cathedral School for Girls in Washington, D. C.

On September 15, in Newark, N. J., Dorothy Campbell Mackelcan, class of 1915, St. Luke's Hospital, New York, to George Newhall Walton.

On September 1, in Pellican Rapids, Minn., Hildor A. Strom to E. J. Thomas. Mr. and Mrs. Thomas will live in Minot, N. D.

On September 9, Ethel Frank to Walter S. Wyatt, M.D., of Lexington, Ky.

On September 15, Winifred C. Mutschelknauss, class of 1916, Bismarck Hospital, Bismarck, N. D., to Mr. August Klamm of Thompson, N. D.

On October 6, Florena W. Blodgett to Thomas Brown McClelland. Mr. and Mrs. McClelland will live in Porto Rico.

On September 25, in Hartford, Conn., Alice Marion Fanning, class of 1914, Hartford Hospital, to William Thornton. Mr. and Mrs. Thornton will live in Hartford.

On October 2, in Ontario, Canada, Annie M. Gawley, class of 1918, Hartford Hospital, Hartford, Conn., to Fred Hornsby. Mr. and Mrs. Hornsby will live in Hartford.

Recently, in Truro, Nova Scotia, Jean Munsey, class of 1918, Hartford Hospital, Hartford, Conn., to Earl Vincent. Mr. and Mrs. Vincent will live in Truro, Nova Scotia.

On September 23, Louise Meech Miner, class of 1920, Hartford Hospital, to Claude Beardslee. Rev. and Mrs. Beardslee will live in Southington, Conn.

Recently, Florence Kibbe, class of 1917, Hartford Hospital, Hartford, Conn., to Raymond Jacobs. Mr. and Mrs. Jacobs will live in West Hartford, Conn.

Recently, Lucy Goodwin Plumb, class of 1920, Hartford Hospital, Hartford, Conn., to Arthur Delafield Smith. Mr. and Mrs. Smith will live in New York City.

On September 29, Margaret A. Sosnowski, class of 1913, University of Pennsylvania Hospital, to George A. Shigo. Mr. and Mrs. Shigo will live in Free-land, Pa.

On September 28, Rozella Hayes, class of 1909, Rochester Homeopathic Hospital, to Irvin H. Neiman. Mr. and Mrs. Neiman will live in Maytown, Pa.

On September 8, Julia Celia Danksys, class of 1914, F. F. Thompson Hospital, Canandaigua, N. Y., to Edward John Segaritis. Mr. and Mrs. Segaritis will live in Guardville, Pa.

Recently, Mildred A. Jackson, Staten Island Hospital, to Chester Brower.

Recently, Edna Verkens, class of 1917, Hackensack Hospital, Hackensack, N. J., to Stanley Russel. Mr. and Mrs. Russel will live in Dumont, N. J.

Recently, Marie Sutton, class of 1916, Hackensack Hospital, Hackensack, N. J., to Charles Murry. Mr. and Mrs. Murry will live in Oregon.

Recently, Lucy Swartz, class of 1915, Hackensack Hospital, Hackensack, N. J., to J. Stolle. Mr. and Mrs. Stolle will live in Idaho.

Recently, May Swartz, class of 1918, Hackensack Hospital, Hackensack, N. J., to William E. Murphy, M.D. Dr. and Mrs. Murphy will live in Cuba.

Recently, Mildred Cocks, class of 1915, Hackensack Hospital, Hackensack, N. J., to James Simpson. Mr. and Mrs. Simpson will live in Hackensack.

Recently, Frances Benjamin, class of 1917, Hackensack Hospital, Hackensack, N. J., to Alvin J. Morian. Mr. and Mrs. Morian will live in Bridgeport, Conn.

On October 6, in Fort Leavenworth, Kansas, Augusta Louise Schweizerhof, class of 1915, Frankford Hospital Training School, Philadelphia, to George Edward Lindow, M.D. Dr. and Mrs. Lindow will live in Fort Leavenworth.

Recently, in New York, Lillian M. Harvey, class of 1913, Samaritan Hospital, Philadelphia, to Fredrick Campbell. Mr. and Mrs. Campbell will live in Odessa, N. Y.

Recently, Marion E. Hartman, class of 1911, Samaritan Hospital, Philadelphia, to Fredrick Nissle.

Recently, Charity Bennett, class of 1914, Samaritan Hospital, Philadelphia, to George Schulte. Mr. and Mrs. Schulte will live in Philadelphia.

Recently, Ethyl B. Collins, class of 1919, Samaritan Hospital, Philadelphia, to Omer H. Etter, M.D. Dr. and Mrs. Etter will reside in Warrensville, Pa.

On September 8, Helen Mary McNaughton, class of 1918, Presbyterian Hospital, Chicago, to Matthew Lyle Spencer. Mr. and Mrs. Spencer will live in Seattle, Wash.

On September 11, Caroline A. Parker, class of 1920, Presbyterian Hospital, Chicago, to Claire Gifford Hemphill. Mr. and Mrs. Hemphill will live in Chicago.

On September 22, in LaGrange, Ind., Hazel Lois McCoy, class of 1917, Presbyterian Hospital, Chicago, to William Hugh Herron. Mr. and Mrs. Herron will live in Mellstone, Montana.

On June 26, Edna Holzman, class of 1920, Presbyterian Hospital, Chicago, to Gilbert Waite, M.D. Dr. and Mrs. Waite will live in Elkins, W. Va.

On August 5, Elizabeth McIntosh, class of 1909, Presbyterian Hospital, Chicago, to William Frederick Gilbert. Mr. and Mrs. Gilbert will live in Calgary, Alberta, Canada.

On September 2, Mrs. Eleanor McConnell, class of 1915, Presbyterian Hospital, Chicago, to Ralph P. Truitt, M.D. Dr. and Mrs. Truitt will live in Chicago.

On October 2, Sophie Bruynje, class of 1914, Passaic General Hospital, Passaic, N. J., to Louis Uitendaal.

On June 29, Gertrude Trisch, class of 1913, Connecticut Training School for Nurses, New Haven, and class of 1920, School of Public Health Nursing, New Haven, Conn., to Sidney Hadley. Mr. and Mrs. Hadley will live in New Haven.

On August 16, Claire Adele Pease, class of 1911, Meriden Hospital, Meriden, Conn., and class of 1918, School of Public Health Nursing, New Haven, to Edward Joseph Brennan, D.D.S. Dr. and Mrs. Brennan will live in New Haven.

On October 15, at Missoula, Montana, Lucy Witcomb, class of 1920, Latter Day Saints Hospital, Salt Lake City, to H. C. Stith. Mr. and Mrs. Stith will live in Terry, Montana.

On June 12, in Alton, Ill., Iona Gessner, class of 1917, Lutheran Hospital, St. Louis, Mo., to J. Lewis Campbell. Mr. and Mrs. Campbell will live in Omaha, Neb.

On June 15, Lily Thoma, class of 1918, Lutheran Hospital, St. Louis, to R. E. Dietzschold. Mr. and Mrs. Dietzschold will live in St. Louis.

On August 16, in Detroit, Mich., Clara Andres, class of 1918, Lutheran Hospital, St. Louis, to James J. Phillips. Mr. and Mrs. Phillips will live in Bellevue, Mo.

On August 28, Anna Schmidt, class of 1913, Lutheran Hospital, St. Louis, to Mr. Boonshot. Mr. and Mrs. Boonshot will live at Alfredsville, Ind.

On September 1, in Springfield, Mo., Bertha Mae Bear, class of 1918, Lutheran Hospital, to C. Stevens. Mr. and Mrs. Stevens will live in Tulsa, Okla.

On September 18, A. Kathryn Busse, class of 1918, Lutheran Hospital, St. Louis, to Mr. Miller. Mr. and Mrs. Miller will live in St. Louis.

On October 9, in New York City, Bessie M. Milman, Toronto, Canada, to John Stevens McRea. Mr. and Mrs. McRea will live in South Orange, N. J. Mrs. McRea was first assistant superintendent and later superintendent of the Orange Memorial Hospital.

Recently, Alma E. Klingholz to D. B. Richardson. Mr. and Mrs. Richardson will live at Lake Geneva, Wisconsin.

Recently, Emma A. Dankhoff, to Louis B. Maloney. Mr. and Mrs. Maloney will live in Buffalo.

In August, Patricia Dunn, class of 1919, Mercy Hospital, Mason City, Iowa, to John Geuriet.

Recently, Andra Barbar, class of 1920, Jennie Edmundson Memorial Hospital, Council Bluffs, Iowa, to Dr. Sabin.

On October 5, Bertha E. Bradley, class of 1916, Indianapolis City Hospital, to Henry Allen. Mr. and Mrs. Allen will live in Pendelton, Ind.

Recently, Addie Threlkeld, class of 1916, Methodist Hospital, Indianapolis, Ind., to Clifford R. Lounsbury. Mr. and Mrs. Lounsbury will live in Indianapolis. Both Mr. and Mrs. Lounsbury served overseas.

Recently, Mrs. Jennie Hunter, class of 1914, Protestant Deaconess Hospital, Indianapolis, to William St. Clair.

Recently, Wilhemina Spert, class of 1913, Protestant Deaconess Hospital, Indianapolis, to Charles Shubert. Mr. and Mrs. Shubert will live in Indianapolis.

On October 14, Viola Rathke, class of 1913, Rochester Hahnemann Hospital, to Graydon Long, M.D. Dr. and Mrs. Long will live in Rochester, N. Y.

On July 1, Lulu Ryan, class of 1914, New York Hospital, to Howard Robston.

On July 26, Carita Lemmon, class of 1916, New York Hospital, to William C. Clarke, M.D.

On August 11, Abigail Craig, class of 1915, New York Hospital, to James B. Gillies.

DEATHS

Recently, in Dallas, Texas, at the Baptist Memorial Sanitarium, Esther Lynch, after a long illness following her return from work in France. She will be greatly missed by her friends and sister nurses of the Dallas County Graduate Nurses' Association of which she was a loyal member.

On August 15, at the New York Hospital, Nellie Oliver, class of 1908, New York Hospital Training School for Nurses.

On September 7, at the New York Hospital, J. C. States, class of 1896, New York Hospital Training School for Nurses.

On September 9, at the New York Hospital, A. E. Monohan, class of 1891, New York Hospital Training School for Nurses.

On October 1, at Oskaloosa, Iowa, of tuberculosis, Mrs. Grace Bogges Gilchrist. Mrs. Gilchrist was a member of the class of 1913, St. Luke's Hospital, Cedar Rapids, Iowa.

On September 23, of pneumonia, Mrs. Harmon West. Mrs. West was Florence Miller, class of 1916, Presbyterian Hospital, Philadelphia. She served during the war with the Methodist Hospital Naval Unit.

On July 22, at the Methodist Hospital, Omaha, Neb., Mrs. Ralph Dudley. Mrs. Dudley was Cornelia Pond, a graduate of the hospital.

On September 24, Mary E. Carroll, class of 1906, Homeopathic Hospital, Pittsburgh, Pa.

On September 22, at Knickerbocker Hospital in New York, Elmira Ferguson, class of 1915, Fordham Hospital, and class of 1917, Butler Hospital, Providence, R. I. Miss Ferguson served overseas in Base Hospital No. 58 in France and in Evacuation Hospital No. 14 in Coblenz, Germany. After receiving her honorable discharge from the army last March, she had been doing private nursing in New York. Miss Ferguson was ill only a few hours and her death was a shock to her many friends who mourn her. Burial was at Pawtucket, R. I.

On July 8, at St. Joseph's Hospital, Chicago, Frank Hordeise. Mr. Hordeise had been engaged in private duty for the past few years. His loss will be greatly mourned by a large circle of friends. His genial disposition and willingness to render service made him a favorite.

On September 28, at Passaic General Hospital, Passaic, N. J., Anna Sabol, class of 1911, Passaic General Hospital.

Recently, Grace Beer, class of 1902, Passaic General Hospital, Passaic, N. J.

On July 1, Emma Oberkircher, class of 1908, Lutheran Hospital, St. Louis, due to injuries from an automobile accident. She was active in the profession; was treasurer of the Lutheran Hospital Nurses' Alumnae, and will be greatly missed by her sister nurses.

On September 16, in Hope, Kansas, Edith M. Robinson, graduate of the Iowa Methodist Hospital, Des Moines. Miss Robinson was for many years active in all the nursing work in Iowa. She was one of the organizers of the central registry in Des Moines and was for a time its registrar. She gave of her limited strength to all nursing interests and her faithful and conscientious devotion to duty will ever inspire those who knew her. She was a member of District No. 7, whose members mourn her loss.

On July 26, at Lake Geneva, Wis., suddenly, Phoebe Brown, a graduate of the first class of the Illinois Training School, Chicago, and a charter member of the American Nurses' Association. Miss Brown had been out of active nursing work for some years, but she never lost her interest in her school or her profession. She was one of the most enthusiastic of the small group that organized the alumnae association of the Illinois Training School and was its first president. She took every opportunity of explaining the advantages of organization to young graduates as well as to those who had lost touch with the school. She was a most unselfish woman with a beautiful character.

BOOK REVIEWS

IN CHARGE OF

GRACE H. CAMERON, R.N.

A SHORT HISTORY OF NURSING. By Lavinia L. Dock, R.N., in collaboration with Isabel M. Stewart, A.M., R.N. G. P. Putnam's Sons, 2 West 45th Street New York City. Price, \$3.50.

All training schools for nurses have long been familiar with the detailed and elaborate History of Nursing written by Miss Dock and Miss Nutting. These four valuable volumes are still a necessity in the reference library of every school of nursing, but teachers and pupils alike will welcome this present volume,—a condensation of the larger work—to be used as a class text book and to be owned individually. In order to gather all requisite information into one volume it was necessary to be brief in statement and, at times, to condense a whole epoch into a few terse sentences. However, the facts are here, clearly stated, and the salient points and periods of the profession emphasized. That one may make a complete study of the subject, full bibliography is given at the end of each chapter. Some phases of modern nursing and especially the more recent developments are found only in this volume; for instance, the chapter on Nursing in the World War. The closing chapter sums up the nursing traditions and fundamental ethical principles, giving the thoughtful student an inspiring glimpse of the wonderful possibilities of this "gentlest and most beautiful of all arts." The appendices deal with the Historical Outlines of Nursing History and the Oath of Hippocrates, with two modern adaptations.

SEX ATTRACTION. By Victor C. Vaughan, Sc.D., M.D., L.L.D. C. V. Mosby Company, St. Louis. Price, 50 cents.

The booklet consists of a lecture given to teachers, and states comprehensively, without detail, certain principles connected with the subject of the influence of sex upon the character and well being of an individual, apart from reproduction. We are told that sex attraction is "that pleasure and the mutual satisfaction that come to two persons of opposite sexes when brought into association." "It quickens ambition, modifies and often determines conduct, and weaves the delicate structure of dreams." This being so, all who are engaged in the education of the young should always bear in mind both the good and the ill that may come to those under their care, from sex attraction. The lecture is a careful presentation of this problem; placing the blame where blame is due; warning and cautioning both the youth

and the guardians of youth. A very emphatic assertion, and one which should make each reader pause in earnest thought, is made in the conclusion of the lecture: "Our sons and daughters are what their ancestors, including ourselves, have made them, modified, more or less, by their environment, *for which we are responsible*. (The italics are the department editor's.) This pamphlet might wisely be placed in the hands of each student nurse and a recitation be heard on its contents, being sure that the young woman understands the full significance of the text.

CARE AND FEEDING OF INFANTS AND CHILDREN. By Walter Reeves Ramsey, M.D. Including Suggestions on Nursing by Margaret B. Lettice. Second Edition Revised. J. B. Lippincott Company, Philadelphia and London. Price, \$2.50.

The book is written primarily as a text book for nurses and is both practical, concise, and comprehensive. The anatomy, physiology, and pathology are necessarily brief but sufficient to a full understanding of the text. Simple rules for feeding are given, leaving the more elaborate formulae for more extensive works. Not only is the student taught concerning the care of the sick child but an excellent knowledge of preventive treatment and care is also included. The book is widely used by all nurses engaged in child welfare work.

MANUAL OF PSYCHIATRY. Edited by Aaron J. Rosanoff, M.D. Fifth Edition Revised and Enlarged. John Wiley and Sons, Inc., New York. Chapman and Hall, Ltd., London. Price, \$4.00.

This manual first appeared in English in 1905, as a translation of the French *Manuel de Psychiatrie* by J. Rogues de Fursac. Numerous changes and additions have been made in preparing the present volume, bringing the study up to the present-day knowledge and practice in this branch of neurology.

AN EPITOME OF HYDROTHERAPY for Physicians, Architects and Nurses. By Simon Baruch, M.D. W. B. Saunders Company, Philadelphia and London. Price, \$2.00.

An excellent text on the value of water in the management of disease. The author is a well known hydrotherapeutist and an authority on this subject. If at times the text seems to be contrary to established procedures the author has facts and statistics to sustain his teaching. The detailed descriptions of treatments and the excellent illustrations give clear understanding of technic. An unusual addition is the chapter devoted to hydriatic installation, with special details for the guidance of architects.

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